Medicare Hospital

INFORMATION

Report

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Volume 32

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FOREWORD

The mission of the Health Care Financing Administration (HCFA) is to promote the timely delivery of appropriate, quality health care to the nation's aged, disabled, and poor. The agency must also ensure that beneficiaries are aware of the services for which they are eligible, that those services are accessible, and that agency policies and actions promote efficiency and quality within the total health care delivery system.

To that end, the annual release of the Medicare Hospital Information report is a key element in our continuing efforts to improve the effectiveness of medical practice and the quality of care provided to Medicare beneficiaries. It is also an important step in helping beneficiaries make more informed health care decisions.

The information in this release is not intended as a direct measure of quality of care. It is best used as a "screening tool"—that is, to identify potential problems for further review and, in consultation with medical staff, to evaluate a hospital's strengths and weaknesses. Thus, we believe that consumers can use this information to ask questions of their physicians, rather than reach judgments about the quality of care in a particular hospital. We also expect this information to be used by hospital administrators, physicians, peer review organizations, State survey and certification agencies, and researchers.

This publication presents information to answer the question "What is the actual mortality rate within a certain period of time for each hospital compared to the rate that would have been predicted, given what we know about the characteristics of the patients admitted?" Our basic approach to analyzing hospital mortality information has remained unchanged for the past five years; however, since the last publication of mortality information in May 1991, we have made some significant changes both in our methodology and in the way we display the results of our analysis. The four principal changes in the 1992 report are:

- A graphic presentation of the predicted and observed mortality rates for most hospitals for "All Causes" for Federal fiscal years 1988-1990 at 30, 90, and 180 days;
- The addition of information on certain variables that we use in computing the predicted mortality rates for each hospital;
- The addition of information on the geographic origin of each hospital's patients; and

- A comparison of the average length of stay in each hospital with the average for the State and Nation.

These refinements should make this information an even more valuable educational tool to help improve the quality of care in hospitals. The changes were reviewed by a panel of outside experts. The methodology used to calculate the observed mortality rate, the predicted mortality rate, and the standard deviation are briefly described in the Technical Information section of the Introduction to this volume and in more detail in the Technical Supplement (Volume 55).

We acknowledge the assistance we have received from the American Hospital Association—not only for providing the information detailing selected hospital characteristics, but also for alerting its members to the importance of this information. We are also grateful to the personnel in each hospital who took the time to review the data thoroughly and to provide us with comments and suggestions. As before, we have published individual hospitals' comments in their respective State volumes. Over the years, these communications have helped to improve and refine the information included in this publication.

HCFA is committed to improving the Medicare Hospital Information report. To that end, we are continuing to work with representatives of hospital, consumer, employer and other organizations to make this annual report as useful as possible for all consumers.

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INTRODUCTION

The Medicare Hospital Information report contains information on acute care hospitals that treated Medicare patients discharged in Federal fiscal year (FY) 1990 (October 1, 1989—September 30, 1990).

This year's publication set consists of 54 State volumes and a Technical Supplement (Volume 55). There is one volume per State, except that California and Texas have two volumes each, Hawaii is combined with American Samoa and Guam, and Puerto Rico and the Virgin Islands are combined together in one volume.

Each hospital's two summary data pages are arranged alphabetically by hospital name in each State volume. These data pages consist of:

- The hospital's FY 1990 Medicare hospital mortality rates;
- A graphic presentation of the predicted and observed mortality rates for **most** hospitals for "All Causes" for FYs 1988—1990 at 30, 90, and 180 days;
- The FY 1990 values for selected explanatory factors used to predict the mortality rates;
- Origins and lengths of stays of Medicare admissions; and
- Hospital characteristics, such as the number of beds and other characteristics, which we obtained from data contained in the American Hospital Association's (AHA) 1990 Annual Survey of Hospitals files or, when such information was not available from the AHA file, the Health Care Financing Administration's (HCFA) Online Survey, Certification and Reporting System (OSCAR) file.

> ***Please note that the information regarding origins and lengths of stays and hospital characteristics are presented strictly for information purposes only. They were not used to calculate the hospital's predicted mortality rates.***

Toward the end of each volume, we include both State and national mortality rates developed by our analysis, as well as the comments we received from individual hospitals.

DESCRIPTION OF MORTALITY INFORMATION

The mortality rates at a given hospital may reflect, among other factors, the age, sex, diagnoses, and severity of illness of patients admitted to that hospital, as well as the quality of care they received. Factors affecting health and the probability of death vary among the patient populations served by individual hospitals. Consequently, the mortality rates in different patient populations vary considerably.

These latest analyses of the mortality rates associated with Medicare hospitalizations are similar to those carried out in the four prior years. Only one hospitalization for every patient was used. As in last year's analysis, when a patient had multiple hospitalizations during the fiscal year, one stay was selected at random to be analyzed. We believe that the use of the randomly selected admission provides a better representation of a typical hospital admission and permits us to calculate mortality rates more nearly like those the hospital itself would calculate for its patients.

Although we publish data only on deaths which occur within 180 days of admission to the hospital, for purposes of analysis our methodology actually considers deaths which occur any time within 365 days of admission (with the exception that no date of death later than April 1, 1991 is used). This is part of the formula which assesses the long-term risk of mortality. With this approach, information about the early and later results of the hospitalization is provided. This is important because diseases evolve with different time courses, and treatments may have different short- and long-term effects. The choice of at least 180 days allows substantial followup consistent with timely reporting of HCFA data.

We again analyzed the data on a fiscal year, rather than on a calendar year, basis because it allows us to report on recent hospitalizations. Also, new Medicare rules are often instituted on a fiscal year basis.

For each hospital, mortality rates are presented for overall Medicare patient mortality and for eight medical conditions and nine procedures. The information consists of the number of Medicare patients; the observed or actual mortality rate (OBS); the predicted mortality rate (PRED), given the mix of patients; and a standard deviation (SD), a measure of the uncertainty of the predicted rate.

The following information will be helpful when reviewing specific information for any given hospital.

Number Of Cases

This is the number of individual Medicare beneficiaries whose discharge in a fiscal year from the short-term, acute care hospital listed was selected for analysis. The total number of cases randomly selected for each hospital is presented under the category "All Causes." The eight medical condition and nine surgical procedure categories are subgroupings drawn from the "All Causes" selection. Although a particular patient may appear in only one of the eight medical condition categories, that same patient may also appear in one or more of the nine surgical procedure categories. Similarly, a patient may appear in one or more of the nine surgical procedure categories, even though he or she was not included in any of the eight medical condition categories.

The categories chosen for display represent HCFA's interpretation of the categories judged to be important by various outside advisors including the Institute of Medicine. The listed condition and procedure categories do not cover the reason for admission of all the hospitalized Medicare patients in this study. (The ICD-9-CM codes included in each condition and procedure category appear in Table 1 following this Introduction section.)

These conditions and procedures represent the causes for the hospital admission and/or surgical episodes during that stay; they do not necessarily represent the cause of death. HCFA does not have access to cause of death information.

Observed Mortality Rate (OBS)

The observed mortality rate for each category is the percentage of each acute care hospital's selected Medicare patients who died within 30, 90, or 180 days of the selected admission. This rate does **not** represent the percentage whose death was caused by a particular condition or procedure.

The percentage is rounded to the nearest one-tenth of one percent. Both inhospital deaths and deaths occurring after discharge but within 30, 90, or 180 days of admission are included. For example, if a hospital had 1,000 patients included in the "All Causes" category and 124 of these patients died within 30 days of the selected admission, the 30-day observed mortality rate would be 12.4 percent; if an additional 17 patients died more than 30 but less than 91 days after admission, the 90-day observed mortality rate would be 14.1 percent; and if an additional 13 patients died more than 90 but less than 181 days after admission, the 180-day observed mortality rate would be 15.4 percent.

It is important to note that the observed mortality rate is cumulative; e.g., the 90-day observed mortality rate includes all deaths which occur within 30 days of admission, as well as those occurring more than 30 and less than 91 days after admission.

Predicted Mortality Rate (PRED)

The predicted mortality rate for each hospital's patients is derived in part by determining, based on national experience, the contribution to the probability of dying associated with various patient characteristics such as:

- Principal diagnosis (grouped into 23 analytical risk categories),
- Age,
- Sex,
- Previous hospital admissions within the prior six months,
- Admission source (e.g., physician reference, skilled nursing facility reference),
- Admission type (e.g., elective or emergency), and
- The presence of up to seven comorbid conditions—cancer, chronic cardiovascular disease, chronic renal disease, chronic liver disease, chronic pulmonary disease, cerebrovascular degeneration, and chronic diabetes. A list of the ICD-9-CM codes defining the comorbid conditions is in Table 2 following this Introduction section.

Standard Deviation (SD)

The standard deviation is a tool to gauge the extent to which the difference between the observed and predicted mortality rate is meaningful. In general, the greater the difference between the two rates, the greater the probability that the difference represents an actual variation from what would be expected in view of the national experience. The less chance that the difference between the PRED and the OBS can be attributed to statistical variability, the more grounds for possible concern about the institution's performance.

Information on how to use the SD to construct prediction intervals for use in assessing the real difference between the OBS and the PRED is included in the Technical Information section of this Introduction. The precision and interpretability of the estimates are weaker when there are no deaths or 50 or fewer cases in a particular category being analyzed. Thus, for these instances, dashes ("---") are placed in the SD column.

Observed Mortality Rate And Predicted Range For Medicare Patient Admissions For All Causes

Also in this year's report, we have presented graphs that display the information for most hospitals described above for FYs 1988 and 1989, as well as FY 1990. (In particular, these graphs could not be computed for hospitals that had 50 or fewer cases or no deaths in FYs 1988, 1989, or 1990). In constructing the graphs, we used 2 times the standard deviation to approximate a 95 percent prediction interval. The observed mortality is shown as a dot (•). The predicted mortality is shown at the middle of a range of mortality rates. The bottom of the range is the predicted mortality minus twice the standard deviation, and the top of the range represents the predicted mortality plus twice the standard deviation. The graphs for FY 1988 and FY 1989 are based on new random samples and new computations for this year's report. Thus, the calculations for some hospitals for FY 1988 and FY 1989 may be different from previous releases, because we are including more current data in this year's report.

FY 1990 Values For Selected Explanatory Factors Used To Predict Mortality Rates

This year's report includes the FY 1990 average at each hospital of many of the explanatory factors used to predict that hospital's mortality rates. This information provides a profile of the patients used in the analysis and should help to identify possible systematic coding errors in the claims data used to calculate the mortality rates. These percentages are derived from the patients included in the sample and should be applied to the total number of cases listed in "All Causes." It is important to note that neither the admission sources/types nor the comorbidities categories are mutually exclusive. For example, a patient could be both "referred by his personal physician" and "admitted for elective procedure." Similarly, a patient could have secondary diagnoses of both cancer and diabetes.

Information Sources And Notes

We believe that when the mortality rate information is properly understood and applied, it can be very useful; it can also be misleading if it is interpreted incorrectly. The information simply describes one of several possible outcomes at a hospital—postadmission mortality for Medicare beneficiaries.

Mortality information is not necessarily representative of a hospital's total performance in all aspects of patient care. Individual hospitals may have very good reasons for their rates being higher than the rates predicted by the HCFA model. For example, one hospital might have different death rates than another because its patient mix is not fully accounted for by the model.

Accordingly, we offered each hospital the opportunity to review their specific information and to provide comments to HCFA and the public, and we included those comments that were received timely at the end of this volume. Users should read the discussions about the uses and limitations of the mortality information found on page xiii, as well as any comments a hospital may have provided.

Hospitals In The Analysis

The hospitals included in this analysis are participating in Medicare as short-term, acute care facilities—all have a zero in the third position of their Medicare provider number. All other hospitals—those with something other than a zero in the third position of their provider number, such as rehabilitation facilities or psychiatric institutions—were excluded. This year, as in the past two years, we have also excluded hospices.

In some cases, we have included data for hospitals that closed, changed ownership, or changed management either during or subsequent to FY 1990. Our data included for those institutions reflects the situation as it existed at the time the hospitalizations analyzed occurred.

Data Sources

This report is based primarily on Medicare hospital billing information for Federal fiscal years 1988, 1989, and 1990. While the principal source of the data for the analysis was the HCFA-maintained Medicare Provider Analysis and Review (MEDPAR) file, which contains information about each Medicare hospitalization, some of the information about beneficiaries, such as date of death, was obtained from the Social Security Administration. Hospitals submit bills to HCFA's fiscal intermediaries (which handle claims for the inpatient care provided to Medicare beneficiaries) which, in turn, submit this information to HCFA. The file is updated on a quarterly basis. Our analysis was based on information available following the June 1991 update of the MEDPAR file. It is estimated that by that time (nine months after the close of the fiscal year), 98 percent of all Medicare discharges in FY 1990 are included in the file.

Possible Limitations Of The Data

In any large-scale data base, such as the one dealing with Medicare hospitalizations, there will be gaps or inaccuracies. For example, last year some hospitals had not accurately reported the source or type of admission, and thus erroneous information was included in the analysis for those hospitals. However, the fact that the files contain information on about 10 million hospital admissions to nearly 6,000 hospitals for each year provides some assurance that, for purposes of the statistical analysis conducted here, the information that might be

missing or inaccurate is such a small portion of the total that it would have little effect on the results for national estimates. Nevertheless, it may substantially affect an individual hospital if it were the source of the inaccurate information.

While we feel that the information used in this analysis is thorough and complete, there are a few points to keep in mind as you review the mortality information.

The information used is billing data; it is only as good as the information submitted by hospitals as part of the payment process. Although there is always a possibility that coding errors are included, we assume that, given the link to payment, hospitals have an incentive to submit bills accurately and promptly. We do know, however, that some hospitals submitted incomplete or erroneous data.

For example, following last year's public release of the hospital mortality data, several hospitals wrote to HCFA indicating that they had submitted incorrect data. Furthermore, they stated that if they had given us the correct information, their predicted mortality rates would have been higher than those presented in HCFA's report. Therefore, in this year's report we have annotated those hospitals' data pages with a footnote stating: "This hospital says that it submitted inaccurate data to Medicare and claims that its predicted mortality rate should be higher than that presented above." At this point, however, HCFA cannot confirm the validity of those hospitals' claims. The analysis results might very well be different if the data on which they were based were submitted accurately by those hospitals.

In our previous analysis of mortality data, we discovered that some States had zero admissions from a skilled nursing facility. While some of these problems were corrected on the MEDPAR files used for this analysis, at the time this study was initiated we found empirical evidence that some of the files still contained suspect information. The suspect data were identified by noting those months (date of discharge) and fiscal intermediaries for which the type and source of admission fields appeared to be interchanged. Based on our findings, we reversed these fields to at least partially correct the remaining discrepancies. The following list shows the specific instances for which the fields were reversed for this analysis.

TYPE AND SOURCE OF ADMISSION FLIPPED

FI No.	FI Name	Dates
00030	Arizona Blue Cross	10/01/86 — 12/31/88
00080	Maryland Blue Cross/DC	06/01/87 — 09/30/87
00190	Maryland Blue Cross	06/22/87 — 12/31/88
00400	Texas Blue Cross	12/07/87 — 12/31/88

How To Use This Information

There are several key points to remember about the use of this information. **First, it is important to understand that the difference between the hospitals' mortality rates and the predicted rates in the tables in this report may not be a direct measure of the quality of care rendered in the hospitals.**

Second, the usefulness of this information depends upon the accuracy with which mortality rates can be predicted. We do not currently have any direct measurement tool with which we can fully adjust for severity of patient illness differences among hospitals. For instance, two hospitals may have very different death rates for patients admitted for stroke, even after we have adjusted for age, sex, and several other factors. This might happen because one hospital's stroke patients may consist of a significant number who are admitted in a coma (and are thus more likely to die), whereas another hospital's patient population may represent a broader spectrum of patients with cerebrovascular problems, or because these two hospitals, in fact, do provide different levels of quality of care. In addition, other factors affecting the probability of death in a particular case (e.g., family status/support, overall health status of the patient, etc.) are not included in the predictive model because information on them is not readily available.

Nevertheless, we believe that the information presented in this publication is an important contribution to the health care community and should be helpful to a wide range of individuals and organizations including consumers, hospital administrators, physicians, PROs, and researchers.

Use By Consumers — Some Key Questions

Consumers should read carefully the explanations of the uses and limitations of the information. Listed below are some questions that we recommend a consumer think about before choosing a hospital. Please keep in mind that this is not a comprehensive list, but it should serve to illustrate the types of questions that are important to consider.

- Why are the hospital's observed mortality rates for "All Causes" consistently and significantly above the predicted rates for FY 1990?

- Why are the hospital's observed mortality rates for the condition for which I need treatment or the procedure I will undergo consistently and significantly above the predicted rates for FY 1990?

- How does this hospital's pattern of mortality compare with that of other hospitals in the State and Nation?

- Is the number of cases too small to present a satisfactory picture of the hospital?

- Does the hospital treat a large number of cases in the category for which I need treatment?

- Does the hospital treat a large number of patients who have several co-existing illnesses or who otherwise are likely to be "sicker" than average?

Other Users Of This Publication

Among other users of this publication, we expect that the hospital administrator (in consultation with medical staff) will find the information most useful as a screening tool to evaluate a hospital's strengths and weaknesses. We know that some hospitals and their medical staffs, using established and newly emerging quality assessment techniques, are seeking information that will result in improved health care delivery.

Outside Assistance In Developing This Publication

The development and presentation of the Medicare Hospital Information report continues to be an important part of HCFA's responsibilities in the health care community. To make the information as accurate and useful as possible, over the past several years we have discussed the theoretical framework and statistical approach with a number of nationally recognized technical experts in appropriate fields. Based on their recommendations, we believe that the models used in these analyses continue to be reasonable and appropriate.

In the past, we have conducted validation studies of our methodology. In general, these studies have found correlation between poor quality care and hospitals whose observed mortality rates significantly exceed the rates that would have been predicted. However, we have also found that detailed clinical data which more thoroughly characterize the severity of patient's illness, while they do not materially affect results describing the general pattern of mortality, do, in specific instances, alter our assessment of the comparison of the observed to the predicted mortality rates.

The format for presentation, the process for sharing the information with individual hospitals, and the statistical methodology have been discussed at various meetings with leaders of organizations representing Medicare beneficiaries, physicians, and hospitals. Also, we have spent many months reviewing the comments received from the hospitals regarding their patient-specific data for earlier years and our previous mortality information reports. Many suggestions from these sources have been incorporated into this report.

We have carefully investigated comments from individual hospitals on apparent discrepancies or errors generated in previous years. These discrepancies rarely had an effect on a hospital's overall mortality rate. Most of these instances fell into the following two broad categories.

- **Inaccurate Date of Death —** We found that inpatient billing coding errors (e.g., a hospital bill indicating that the patient's status at time of discharge was "expired" when the patient had, in fact, left the hospital alive) created many of these errors. We now have mechanisms in place that allow a continuous update of HCFA's master file, thereby enabling us to make corrections.

- **Discrepant Case Counts —** Our analysis counts only one acute care discharge in a fiscal year; normally, hospitals count each discharge. Thus, a patient admitted three times in a year would count three times for the hospital, but only once for the purpose of analyzing Medicare hospital mortality data presented in this report.

We believe it is important for consumers of health care to have access to as much information about hospitals as possible when making health care choices. Along with hospital characteristics information, we have added this year information about the origin and length of stay of Medicare admissions. This information is presented for comparative purposes only and was not used in calculating a hospital's predicted mortality rates. These data were not part of the analyses, and any errors or discrepancies in them do not affect the predicted mortality rates.

Origin of Medicare Admissions

Data on the geographic origin of each hospital's patients are presented in this year's report. We obtained from the Health Insurance Master file the State and county of residence for each Medicare beneficiary discharged from a Medicare-certified, acute care hospital during FY 1990. We then compared that information with the location of the hospital to determine the percentage of all discharges where the patient lived within the same city/county as the hospital location, within the State where the hospital is located, or outside the State. The percentages are derived by dividing the number of discharges of beneficiaries in a geographic category by the total number of Medicare discharges from the hospital. Please note that these are percentages of total Medicare discharges, not of the mortality sample alone.

Medicare Average Length of Stay

We obtained from the MEDPAR file the total days of care—both Medicare covered and noncovered—and divided that total by the number of discharges from each hospital. Total, rather than covered, days were used because, under the Prospective Payment System (PPS), if a Medicare patient has at least one day of hospital coverage available to him in the current spell of illness, the hospital will be paid the full diagnosis related group (DRG) amount plus any approved outlier amount, regardless of the number of days actually used.

Example: Hospital A had 2,513 Medicare discharges with a total of 24,379 days.

Calculation: $\frac{24,379}{2,513} = 9.7$ days

The Medicare average length of stay is 9.7 days.

Hospital Characteristics

As noted previously, we have again included information on selected hospital characteristics such as the number of beds, occupancy rate, ownership, staffing, and specialty services. This information was obtained from the American Hospital Association's (AHA) 1990 Annual Survey of Hospitals, with the exception of the case mix index (CMI), which was derived from HCFA billing data. This file consists of information voluntarily reported by hospitals to the AHA. In instances where AHA data were unavailable, for example for hospitals that did not respond to the AHA survey, we derived the information from HCFA's Online Survey, Certification and Reporting system (OSCAR). The hospital characteristics and the specific special services listed were selected with the concurrence of the AHA as being those most meaningful to the Medicare population. Information on these specific data elements follows.

AHA Definitions (except for CMI)

Survey and Year — AHA 1990. Source is the American Hospital Association's 1990 Annual Survey of Hospital files.

Profile

Total beds (#) — Number of beds (including subacute beds), cribs, and pediatric and neonatal bassinets regularly maintained (set up, staffed, and ready for use) for inpatients as of the close of the reporting period; does not include bassinets for normal newborn infants.

Occupancy rate (percent) — Ratio of average daily census to the average number of beds (statistical beds) maintained during the 12-month reporting period. (NOTE: The number of these "statistical beds" may differ from the bed count at the close of the reporting period.)

Ownership/control — State government, local government, district/authority, church, private nonprofit, private for profit, or Federal Government.

Medicare discharges — The total number of inpatient discharges for Medicare patients for those hospitals selected for the mortality calculations, including all discharges for persons with more than one hospitalization during the year. (The mortality data include only one randomly selected discharge for each hospitalized enrollee. Therefore, this figure may reflect more discharges than the actual number of cases randomly selected for the mortality study.)

Case mix index (CMI) — A measure of the overall complexity of the Medicare cases treated by a given hospital compared to the complexity of the national average case mix. The CMI represents the relative costliness of each hospital's mix of cases compared to the national average mix of cases. A CMI of greater than one means that a hospital treats more complex cases than average. A CMI of less than one means that a hospital treats less complex cases than average. The CMI for each hospital is calculated on an annual basis. In this report, the CMI presented for each hospital is calculated based on its discharges in FY 1990.

A hospital's CMI is calculated by multiplying the number of cases in each DRG by the relative weight of that DRG, summing the products, and dividing the sum by the total number of cases for the year. For calculating the FY 1990 CMI, use the DRG relative weights published in the *Federal Register*, Volume 54, Number 169, pages 36468 ff., dated September 1, 1989.

Staffing (all AHA counts are as of 9/30/90)

Total number of physicians — Total active and associate medical staff.

Percent of physicians who are board-certified specialists — Physicians who have passed an examination given by a medical specialty board and have been certified by that board as a specialist.

Medical residents/interns — Full-time equivalent (FTE) medical residents or interns.

Registered nurses — Full-time equivalent (FTE) registered nurses.

Licensed practical nurses — Full-time equivalent (FTE) licensed practical nurses.

Specialty Services

Burn Unit — Provides more intensive care to severely burned patients than the usual acute nursing care provided in medical and surgical units. Beds must be set up and staffed in a unit specifically designated for this service.

Cardiac Intensive Care — Provides patient care of a more specialized nature than the usual medical and surgical care, on the basis of physicians' orders and approved nursing care plans. The unit is staffed with specially trained nursing personnel, and contains monitoring and specialized support or treatment equipment for patients who, because of heart seizure,

open-heart surgery, or other life-threatening conditions, require intensified, comprehensive observation and care. May include myocardial infarction, pulmonary care, and heart transplant units. Beds must be set up and staffed in a unit(s) specifically designated for this service.

Comprehensive Geriatric — Provides diagnostic and evaluation services that determine elderly patients' long-term care needs. It includes the assessment of medical conditions, functional activities, and mental and emotional conditions, and incorporates these into a treatment plan which includes family and financial concerns as well as medical needs.

Hospice Care — A program providing primarily medical relief of pain and support services to terminally ill patients and assistance to their families in adjusting to the patients' illness and death.

Medical/Surgical Intensive Care — Provides nursing care to adult and/or pediatric patients of a more intensive nature than the usual medical, surgical, pediatric, and/or psychiatric care on the basis of physicians' orders and approved nursing care plans. Included are medical-surgical, pediatric, and psychiatric (isolation) units. These units are staffed with specially trained nursing personnel, and contain monitoring and specialized support equipment for patients who, because of shock, trauma, or life-threatening conditions, require intensified, comprehensive observation and care. These units may also include cardiac care when such services are not approved in a distinct cardiac care unit. This category is called "intensive care unit" in OSCAR.

Organ/Tissue Transplant — The hospital has the necessary staff and equipment to perform the surgical removal of a viable human organ or tissue from a donor, either living or deceased, and the surgical grafting of the organ/tissue to a suitably evaluated and prepared patient.

Other Intensive Care — Provides nursing care to adult and/or pediatric patients with a specialized disease or condition of a more intensive nature than the usual medical, surgical, pediatric, and/or psychiatric care on the basis of physicians' orders and approved nursing care plans. Examples reported include oncology or spinal cord injuries. These units are staffed with specially trained nursing personnel and contain monitoring and specialized support equipment appropriate for the patients' specialized conditions.

Trauma Center — Provides emergency and specialized intensive care to critically injured patients.

Other Specialty/Hospital-Based Services

Alcohol/Drug — Hospital services for the medical care and/or rehabilitative treatment of outpatients whose primary diagnosis is alcoholism or other chemical dependency.

Rehabilitation — A unit having designated beds and providing a comprehensive array of multidisciplinary medical rehabilitation services.

Psychiatric — Care provided to emotionally disturbed, chronically mentally ill, mentally disordered, or other mentally incompetent patients on the basis of physicians' orders and approved nursing care plans. Beds must be set up and staffed in units specifically designated for this service.

Medicare Swing Beds — The hospital is certified by Medicare to provide "swing bed" services; that is, some acute care beds can be used for skilled nursing facility type care in the hospital for Medicare purposes.

OSCAR Definitions (except for CMI)

Survey and Year — HCFA, most recent year. Data were derived from the Online Survey, Certification and Reporting System (OSCAR).

Profile

Total beds (#) — Total number of operational beds eligible for Medicare payment.

Ownership/control — Church; private, nonprofit; other nonprofit; proprietary; Federal Government; State government; local government; and hospital district or authority.

Case mix index (CMI) — See definition shown in AHA "Profile" section.

Staffing

Medical residents/interns — Full-time equivalent (FTE) medical residents or interns.

Registered nurses — Full-time equivalent (FTE) registered nurses.

Licensed practical nurses — Full-time equivalent (FTE) licensed practical nurses.

Specialty Services

NOTE: There are no specific definitions of specialty services in OSCAR. Characteristics are self-reported by each hospital at initial Medicare certification and recertification, and are generally understood to parallel the explicit AHA definitions (above). The AHA categories "comprehensive geriatric" and "other intensive care" are not available in OSCAR. However, they may be included in the OSCAR category of other specialty services (not shown in table).

Coronary Care — See definition shown in AHA "Specialty Services" section.

Intensive Care Unit — See definition shown in AHA "Specialty Services" section. These units may also include other intensive care units in OSCAR reporting.

Organ Transplant — See definition shown in AHA "Organ/Tissue Transplant" section. May include tissue transplants because there is not a separate field in OSCAR for these services.

TECHNICAL INFORMATION

Data Sources

The data analyzed in this report are obtained from the Medicare Provider Analysis and Review (MEDPAR) file for the fiscal years 1987-1990, which contains information on the hospital stays of Medicare beneficiaries. The principal sources of data for this file are the bills (known as HCFA-1450 or UB-82) submitted by the hospitals to HCFA through fiscal intermediaries. The MEDPAR file also contains data about the beneficiaries, such as age, sex, and date of death, which are obtained from the Social Security Administration, the Railroad Retirement Board, or the Office of Personnel Management.

Hospital stays with discharges in fiscal years 1988, 1989, and 1990 were used in these analyses. Hospital stays in 1987 were used only to characterize the prior admissions of the patients in the 1987 cohort. Only acute care hospital stays in short-term (general and specialty) hospitals were selected. These hospitals have a "0" in the third position of their Medicare provider number. Hospital stays in institutions (designated by a "9" in the fourth position of the provider number) and hospital stays in psychiatric units, rehabilitation units, swing-beds and alcohol/drug units (with "special unit codes" of S, T, U and V, respectively, in the third position) were excluded.

The Mortality Model

For each beneficiary in each year one hospitalization was selected at random. Choosing a specific hospitalization is necessary to avoid multiple counting of the same death for that year. Selecting a random hospitalization instead of the first or last in the year produces mortality rates that are more representative of the rates that a hospital might calculate for its patients. Also, the mortality rates based on this random selection process reflect an intermediate position between the rates produced by the alternatives.

The selected hospital stays were analyzed separately by analytical category. The analytical categories were created by grouping ICD-9-CM diagnosis codes that had similar mortality patterns. The procedures for creating the analytical categories and the groups of ICD-9-CM diagnosis codes that defined them are detailed in the Technical Supplement.

The mortality experience of the patients was evaluated as a function of time within 365 days of the admission. The factors included in the mortality model used to evaluate each patient's probabilities of death are given in Table 3. They consist of demographic characteristics (age and sex), major comorbidities (chronic diseases likely to have been present at admission and believed to

complicate management and increase the likelihood of an adverse outcome), prior admissions (grouped into five risk or severity levels) within the 6 months preceding the admission evaluated, admission type (emergent, elective, etc.), and admission source (referral from the physician's office, the nursing facility, etc.). The specific reason for the admission (the principal diagnosis) and the performance of selected surgical procedures were additional factors used in the estimation of the predicted probability of death (see below).

The observed mortality rate for a hospital was calculated by means of the lifetable method ("The LIFETEST Procedure," Chapter 22, SAS User's Guide: Statistics, Version 5 Edition, pages 529-557).

ANALYTIC TECHNIQUES

A time-to-event or survival model with explanatory or concomitant variables was used to ascertain the influence of the patient characteristics listed above on the probability of death. A feature of such a model is allowance for "right censored" observations. Generally, these are events or outcomes which would have occurred but for some interference that prevents further observation. In the present analysis, "right censoring" occurs when a patient is withdrawn alive from the study April 1, 1991 or at the end of the followup period of 365 days.

The survival function, S(t), is one of several equivalent ways of expressing the model. Another form uses the cumulative distribution function or the mortality function

$$F(t) = 1 - S(t).$$

Another useful formulation of these models is the hazard function, h(t), also known as the force of mortality or risk function. The hazard is the rate of decrease in the number of survivors relative to the number of survivors at a specific time. Mathematically, the hazard function is

$$h(t) = -\frac{1}{S(t)}\frac{dS(t)}{dt} = -\frac{d\ln(S(t))}{dt}.$$

The probability density function, f(t), commonly used in statistical texts can be expressed as follows:

$$f(t) = \frac{dF(t)}{dt} = h(t)S(t).$$

The area under the survival curve is the expected value for t. In some cases, the area under the survival curve is restricted to an interval 0-t_1 where t_1 might be one year, for example.

The specific time-to-event or survival model used in the present analysis is Bailey's modification of the Makeham model. The survival function for the Bailey-Makeham model is

$$S(t) = \exp\left\{-\delta t - \left(\frac{\alpha}{\gamma}\right)(1 - \exp(-\gamma t))\right\}$$

where

$$\alpha = \exp(\alpha_0+\alpha_1 x_1+\ldots+\alpha_i x_i+\ldots+\alpha_k x_k)$$
$$\gamma = \exp(\gamma_0+\gamma_1 x_1+\ldots+\gamma_i x_i+\ldots+\gamma_k x_k)$$
$$\delta = \exp(\delta_0+\delta_1 x_1+\ldots+\delta_i x_i+\ldots+\delta_k x_k)$$

are the expressions for each of the structural parameters α, γ, and δ in terms of the k concomitant variables x_i and their associated component parameters α_i, γ_i, and δ_i for i=1, 2,..., k and three intercepts or component parameters α_0, γ_0, and δ_0. The structural parameter δ is the long-term risk which is approached as $t \rightarrow \infty$. The structural parameter α is the initial excess risk which decays with rate constant γ.

For the survival function given above, the risk or hazard function has an especially tractable form of an exponential decay which approaches a long-term risk, δ. The hazard function corresponding to the survival function above is

$$h(t) = \alpha\exp(-\gamma t) + \delta \, .$$

The estimation of the component parameters was carried out in a series of steps in which those covariates which had estimable and statistically significant ($p<0.05$) influences of the probability of death were identified for inclusion in the model. As the model for each of the 23 risk categories was estimated separately, different lists of covariates were used for the final core models.

This first step was followed by the estimation of the additional contribution of specific principal diagnoses in each risk category. In these analyses, the effects of the patient characteristics included in the core models were corrected for. Only those principal diagnoses were retained which were estimable and had more than 900 cases (more than 300 for codes identified by year). Similarly, after adjustment for the effects of both the variables in the core model and the principal diagnoses, correction terms were calculated to estimate the additional information about the probability of death associated with the categorization of the patients into the clinical groups used for the presentation of the data in the mortality tables (see below). These correction terms were negligible for the medical categories but substantial for the surgical categories.

Once the component parameters or regression coefficients α_i, γ_i, and δ_i have been estimated, the predicted probability of patient death at any specified time after admission, 1-S(t), may be calculated for all individuals. To obtain the predicted mortality rate up to a given time for a hospital, it is then only necessary to average over the predicted probabilities of death of its patients to that time.

The analytical categories are useful for grouping the patients into relatively risk-homogeneous strata for the regressions. However, to gain insights into patterns of practice at hospitals, the data are presented for patients grouped into clinically meaningful medical and surgical categories. The 17 clinical categories used in the mortality tables and defined in Table 1 were identified by the Institute of Medicine as being of particular medical and epidemiologic interest.

Estimation of the Standard Deviation for Predicted Mortality

The standard deviation of the predicted mortality rate is used to assess how statistically different the observed mortality rate is from the rate predicted by the national experience with like patients. The standard deviation depends, in fact, on the variance of the residual or the difference between the observed, P, and predicted, $\hat{\Theta}$, mortality rates.

The residual has four components V_1, V_2 , V_3, and V_4 where V_1 is the variance of the estimate of the predicted probability of death. This computationally intensive term was negligible for nearly all cases, compared to other components of variance. Consequently, this term was not included in the present analysis.

V_2 is the binomial variance for n patients

$$V_2 = \frac{\hat{\Theta}\left(1 - \hat{\Theta}\right)}{n}.$$

V_3 is the variation among hospitals not explained by the mortality regression models containing the patient characteristics described above.

$$V_3 = \widehat{\mathrm{Var}(\Theta)} = \left(1 - \frac{1}{n}\right) \widehat{M_2(\Theta)}$$

where

$$\widehat{M_2(\Theta)} = \left\{ \left(\begin{array}{c} \text{Predicted mortality} \\ \text{on basis of} \\ \text{patient characteristics and} \\ \text{adjustment for hospital effects} \end{array} \right) - \left(\begin{array}{c} \text{Predicted mortality} \\ \text{on basis of} \\ \text{patient characteristics,} \\ \text{but omitting the hospital specific effects} \end{array} \right) \right\}^2 \left(\frac{1}{z_p^2} \right)$$

The quantity z_p corresponds to the statistical significance (p-value) of the hospital-specific effect.

V_4 is the variation not explained by the mortality regression models which each include, in addition, an indicator variable for the hospital:

$$V_4 = \left\{ \left(\text{Observed mortality} \right) - \left(\begin{array}{c} \text{Predicted mortality} \\ \text{on basis of} \\ \text{patient characteristics, and} \\ \text{adjustment for the hospital specific effects} \end{array} \right) \right\}^2 .$$

(The regression coefficients of the indicator variable for the hospital are a measure of the influence on the probability of patient death of factors not otherwise specified in the model. These factors include severity of illness not adequately reported on by the patient characteristics deduced from the claims data and the hospital's pattern of practice; i.e., performance.)

The standard deviation given in the mortality tables is just

$$SD = \sqrt{V_2 + V_3 + V_4}.$$

Standardized Mortality Ratio (SMR)

Another method of evaluating a hospital's performance—the Standardized Mortality Ratio (SMR)—is obtained by dividing the observed mortality rate by the predicted mortality rate. An SMR of one means the observed and predicted mortality are equal. A ratio greater than one means the observed mortality exceeds the predicted. A ratio less than one means the observed mortality is less than expected. The more extreme the ratio (significantly greater than one indicating unusually high mortality and significantly less than one indicating unusually low mortality), the greater the attention which should be paid to the results of this mortality report.

For each of the conditions and procedures, selected percentiles for the observed distribution of the SMR are displayed in Table 4. The selected percentiles provide benchmarks for comparison. For example, for a hospital

with 300 cases in the "All Causes" category, with observed mortality of 12.2 percent and predicted probability of 10.0 percent at 30 days, the standardized mortality ratio is

SMR = 12.2/10.0 = 1.22.

Note that an SMR of one means the observed and predicted mortality are equal, while a ratio greater than one means the observed mortality exceeds the predicted, and a ratio less than one means the observed mortality is less than expected. There will be greater interest in the more extreme ratios, either greater than one — excessively high mortality — or less than one — extremely low mortality.

From Table 4 for FY 1990, we find that the ratio is just below the 75th percentile of 1.23. Hence, slightly under 75 percent of the hospitals have an SMR less than that found at this hospital.

However, for a hospital with 900 cases in the "All Causes" category, with observed mortality of 19.3 percent and predicted probability of 10.0 percent at 30 days, the standardized mortality ratio is

SMR = 19.3/10.0 = 1.93.

Since the SMR of 1.93 is greater than the 97.5 percentile of 1.35 (Table 4 for 750 or more cases), there is cause for concern. To further assess this, we examine the displayed data in terms of the measure of uncertainty, the standard deviation.

Measures of Uncertainty

In principle, to use the standard normal approximations to determine prediction intervals, an adjustment must be applied for the skewness and kurtosis inherent in a mortality rate when the rate is considerably less than 50 percent and the number of cases is small. Table 5 presents the multiplicative factors, based on the binomial distribution, for the standard deviation needed to construct prediction intervals for the mortality rates at confidence levels of 75, 95 and 99 percent. Because of the approximations involved in the estimation of the skewness and kurtosis corrections, their precision decreases as the number of cases and the mortality rate decrease; i.e., as the value of the correction increases. In addition, because of simplifications and approximations in the estimation of the standard deviation, the precision of the multiplicative factors given in Table 5 exceeds the precision of the estimate of the standard deviation. Hence, the following rule-of-thumb represents an adequate approximation to the factors in Table 5 and an adequate guide to the **statistical meaningfulness** of the difference between the observed and the predicted mortality rates.

To illustrate the use of Table 5, consider a hospital with 75 cases and a predicted mortality of 13.0 percent with a standard deviation of 5.0 percent. Overall, for hospitals with patients with characteristics similar to those of this hospital, we would expect the actual or observed mortality rate to lie, 95 percent of the time, either between 13.0 percent and 22.9 percent if the actual is larger than the predicted, or between 3.3 percent and 13.0 percent if the actual is less than the predicted. That is because 22.9 percent = 13.0 percent + 1.98 x 5.0 percent, the factor 1.98 having been read from the section of Table 5 with the heading "95 Percent Prediction Interval" and "Factor for Upper Bound," the row "75" for the number of cases, and, by interpolation, between the "10 percent" and the "20 percent" predicted mortality rate columns. Similarly, 3.3 percent = 13.0 percent - 1.94 x 5.0 percent, the factor -1.94 having been read from the section of Table 5 with the heading "95 Percent Prediction Interval" and "Factor for Lower Bound" and the corresponding row and columns.

Therefore, in comparing the actual and predicted rates, more attention should be given to the hospital whose observed mortality rate lies beyond the bounds calculated for the 99 percent prediction interval than to the hospital whose observed mortality rate lies only beyond the bounds calculated for the 95 percent prediction interval. Likewise, more attention should be given to that hospital than to the hospital whose observed mortality rate lies only beyond the bounds calculated for the 75 percent prediction interval.

For the graphs, the observed mortality and an approximate 95 percent prediction interval are displayed. The prediction interval has bounds at the predicted mortality plus 2 times the standard deviation and at the predicted minus 2 times the standard deviation.

In the mortality rate tables, the observed and predicted mortality rates and the standard deviation as a measure for statistical importance of the difference are displayed for the overall and each of the conditions and procedures.

How To Obtain Medicare Hospital Information

The publication has been widely distributed to State health organizations and hospital and medical associations. The publication is available to the public for purchase in 55 volumes, with each volume being sold separately through the Government Printing Office (GPO). More detailed information about the purchase of this publication may be obtained by contacting:

Superintendent of Documents
Government Printing Office
Washington, D.C. 20402
Telephone: (202) 783-3238

As in prior years, the information appearing in the Medicare Hospital Information report is available in machine-readable/electronic format (tape and diskette). The Medicare Hospital Information public use file provides the published information as contained in the 55-volume hardcopy publication, except that the AHA's hospital characteristics are not on this file. Hospital characteristics from HCFA files (OSCAR) are provided instead. The files contain additional information which is useful for supplemental analyses: averages by hospital, MSA, and State for each of the variables used in the model, mortality rates for 15, 30, 60, 90 and 180 days, and cross-reference files which relate State, MSA, and ICD-9-CM codes used to a name. These data should allow analysts to assess an individual hospital's performance in comparison to all hospitals in the State or applicable MSA.

Also available to **hospitals** in machine-readable format is their patient-specific data that were used in the report. These data include the patient variables used in the analysis (e.g., the number and severity level of prior hospitalizations considered by the methodology, admission source and type, etc.) and the predicted probability of death at each time interval for each individual included in the study. With these data it is possible for hospitals to better understand their statistics. **Due to confidentiality considerations, requests for patient-specific data must be forwarded on hospital letterhead, must include the institution's Medicare provider number, and must be signed by the hospital administrator.**

For information about obtaining Medicare Hospital Information electronic media data, please contact HCFA's Bureau of Data Management and Strategy at:

Health Care Financing Administration
Bureau of Data Management and Strategy
Office of Statistics and Data Management
3-A-10 Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207
Telephone: (410) 597-5151

Table 1

DIAGNOSTIC AND PROCEDURE CATEGORIES

The following lists the ICD-9-CM diagnostic and procedure codes used to classify and group patients for presentation

CONDITION/PROCEDURE	ICD-9-CM CODES *(D)=Diagnosis code* *(P)=Procedure code*
Heart Disorders/Procedures	
Acute Myocardial Infarction (AMI)	All of 410 (D) (on 10/1/89 exclude 410 with 5th digit of a 2)
Note: For code 410 a 5th digit was added on October 1, 1989.	
Congestive Heart Failure (CHF)	398.91, 402.01, 402.11, 402.91, 428.0, 428.1, 428.9 (all D)
Angioplasty (ANGPLSTY)	All of 36.0 (P) excluding 36.00, 36.03, 36.04, 36.09 (all P)
Note: Code 36.0 had a 4th digit added on October 1, 1986. Code 36.0 got digits of 0, 1, 2, 3, and 9, and code 36.04 got some previously coded cases of 39.97. On October 1, 1987, code 36.01 was divided into 36.01 and 36.05, and some cases from 36.02 were put into 36.05.	
Coronary Artery Bypass Graft (CABG)	All of 36.1(P) and not Angioplasty (see above)
Pacemaker Insertion, Initial (PACE)	37.73, 37.74, 37.75, 37.77 (after 10/1/87 use 37.70 through 37.73) (all P)
Note: Code 37.70 was restructured on October 1, 1987. Previously the code contained both leads and devices. On October 1 these were separated and devices were coded as 37.80 through 37.83, and codes for the leads were changed into various 37.70 codes.	

CONDITION/PROCEDURE	ICD-9-CM CODES *(D)=Diagnosis code* *(P)=Procedure code*
Pulmonary Disorders	
Pneumonia/Influenza (PNU)	All of 480, all of 481, 482.2, 482.3, 482.9, 483, 485, 486, 487.0 (all D)
Chronic Obstructive Pulmonary (COPD)	All of 491, all of 492, all of 494, Disease all of 496; and 466.0, 518.82, 518.5, and 786.09 when there is a secondary diagnosis of any 496 (all D)
Note: *Code 518.8 got a 5th digit on October l, 1987. Some cases from 799.1 were put into codes 518.81 and 518.82.*	
Cerebrovascular Disorders/Procedures	
Transient Cerebral Ischemia (TCI)	433.1, 433.3, 435 (D) and exclude those patients with an endarterectomy at the time of admission—38.12(P)
Stroke (STK)	431, 434 through 434.9, 436 (all D)
Carotid Endarterectomy (ENDART)	38.12 (P) with 433.1 (D); 433.3 (D) or 435(D) as a principal diagnosis
Musculoskeletal Disorders/Procedures	
Fracture of Neck of Femur (FXHIP)	All of 820 (D)
Hip Replacement/Revision (HIPREP)	81.5, 81.6 (exclude 81.69) (all P). On 10/1/89 code 81.51 (P) through 81.53 (P) with same diagnoses.
Open Reduction of Fractured Femur (OPRDUX)	79.35(P) on condition of 820 (D) as principal diagnosis

CONDITION/PROCEDURE	ICD-9-CM CODES *(D)=Diagnosis code* *(P)=Procedure code*
Genitourinary Disorders/Procedures	
Prostatectomy (PROS)	60.2, 60.3 through 60.69 (all P)
Hysterectomy (HYS)	68.3 through 68.7 (P)
Gastrointestinal Disorders/Procedures	
Cholecystectomy (CHOLOTMY)	51.22 (P)
Sepsis	
Sepsis	003.1, 020.2, 022.3, 036.2, 036.3, 036.89, 036.9, 038.0, 038.1, 038.2, 038.3, 038.40, 038.41, 038.42, 038.43, 038.44, 038.49, 038.8, 038.9, 054.5

Table 2

COMORBIDITY CONDITIONS

(all are D codes)

COMORBIDITY	ICD-9-CM CODES
Cancer	141-160.9, 162-172.9, 174-208.91
Chronic cardiovascular disease	412-414.9, 426-429.1
Chronic liver disease	571-572.8
Chronic renal disease	582-583.9, 585-587, 403.01, 403.11, 403.91, 404.02, 404.03, 404.12, 404.13, 404.92, 404.93
Chronic diabetes	250.01, 250.1-250.91
Chronic pulmonary disease	491-493.91, 496
Cerebrovascular degeneration	290-290.9, 294-299.9

Table 3

EXPLANATORY VARIABLES FOR THE MORTALITY MODEL

Generally the same variables are used for all diagnostic categories.

Demographics

SXFM — An indicator variable: = 1 if Female, 0 otherwise

AGEFM = AGESP if SXFM = 1, 0 otherwise
AGEML = AGESP if SXFM = 0, 0 otherwise

where

$$AGESP = \text{sign}(W-65)\left(\left|\frac{W-65}{65}\right|\right)^{1.44}$$

and

$$W = \left\{ \begin{array}{c} 23 \text{ if } AGE \leq 23 \\ AGE \text{ if } 23 < AGE < 100 \\ 100 \text{ if } 100 \leq AGE \end{array} \right\}$$

Comorbidities		**ICD-9-CM Codes**
(Indicator variables = 1 if comorbidity present on current or prior admission with discharge within 6 months prior to current admission, 0 otherwise)		
CCA	Cancer	141-160.9, 162-172.9, 174-208.91
CCV	Chronic cardiovascular disease	412-414.9, 426-429.1
CLV	Chronic liver disease	571-572.8
CRN	Chronic renal disease	582-583.9, 585-587, 403.01, 403.11, 403.91, 404.02, 404.03, 404.12, 404.13, 404.92, 404.93
CDI	Chronic diabetes	250.01, 250.1-250.91
COP	Chronic pulmonary disease	491-493.91, 496
CCE	Cerebrovascular degeneration	290-290.9, 294-299.9

Co Occurrence of Comorbidities

COP_CCV	1 if COP = 1 and CCV = 1, 0 otherwise
CCA_CCV	1 if CCA = 1 and CCV = 1, 0 otherwise
COP_CCA	1 if COP = 1 and CCA = 1, 0 otherwise
CCE_CCV	1 if CCE = 1 and CCV = 1, 0 otherwise
CRN_CCV	1 if CRN = 1 and CCV = 1, 0 otherwise

Admission Sources and Types

(Indicator variables = 1 if source or type present, 0 otherwise)

PREF	Patient referred by personal or HMO physician
TRSNF	Patient transferred from skilled nursing facility
ELCT	Patient admitted for elective procedure
EMRG	Patient admitted for emergency

Co-Occurrence of Admission Source and Type

PREF_ELEC = 1 if PREF = 1 and ELCT = 1, 0 otherwise

Previous Hospitalizations

P_RISK1	Number at 1st risk level with 3 or more set to 3
P_RISK2	Number at 2nd risk level with 3 or more set to 3
P_RISK3	Number at 3rd risk level with 3 or more set to 3
P_RISK4	Number at 4th risk level with 4 or more set to 4
P_RISK5	Number at 5th risk level with 3 or more set to 3
F(T)	Probability of death from previous admission if discharge within 182 days of current admission, 0 otherwise

Time Trend

FLAG89	1 if discharge in FY1989, 0 otherwise
FLAG90	1 if discharge in FY1990, 0 otherwise
INYEAR	Difference between current admission date and April 1 of fiscal year of discharge

TABLE 4
SMR DISTRIBUTION FOR HOSPITALS WITH GREATER THAN 50 CASES
1990 STUDY, FY1990

CONDITIONS/PROCEDURES	NUMBER OF HOSPITALS	30 DAYS					90 DAYS					180 DAYS				
		2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%
OVERALL(< 750 CASES)	2645	0.45	0.88	1.04	1.23	1.72	0.56	0.90	1.03	1.17	1.54	0.61	0.90	1.02	1.15	1.46
OVERALL(>= 750 CASES)	2684	0.73	0.91	0.99	1.09	1.35	0.79	0.94	1.01	1.09	1.28	0.82	0.94	1.01	1.08	1.24
CONDITIONS																
AMI	1405	0.54	0.80	0.95	1.11	1.42	0.62	0.86	0.99	1.14	1.44	0.63	0.86	0.99	1.13	1.39
CHF	2335	0.43	0.79	0.98	1.17	1.64	0.60	0.85	0.99	1.13	1.49	0.66	0.89	1.00	1.13	1.41
PNEUMONIA/INFLUENZA	2428	0.41	0.78	0.97	1.18	1.68	0.53	0.84	1.00	1.17	1.55	0.57	0.86	1.01	1.16	1.50
COPD	435	0.00	0.63	0.97	1.34	2.06	0.30	0.78	1.02	1.26	1.74	0.40	0.82	1.01	1.24	1.69
TRANS. CEREBRAL ISCHEMIA	404	0.00	0.00	0.83	1.34	3.20	0.00	0.48	0.85	1.31	2.27	0.21	0.60	0.90	1.21	2.05
STROKE	1789	0.53	0.79	0.95	1.13	1.56	0.61	0.84	0.98	1.13	1.47	0.65	0.87	0.99	1.12	1.42
HIP FRACTURE	1199	0.21	0.67	0.93	1.27	2.10	0.40	0.76	0.94	1.19	1.80	0.47	0.78	0.97	1.16	1.64
SEPSIS	254	0.51	0.79	0.96	1.12	1.50	0.65	0.86	0.99	1.13	1.47	0.69	0.89	1.01	1.15	1.44
PROCEDURES																
ANGIOPLASTY	425	0.00	0.49	0.89	1.33	2.66	0.00	0.60	0.93	1.36	2.34	0.00	0.63	0.97	1.34	2.14
CABG	556	0.20	0.68	1.03	1.39	2.45	0.28	0.73	1.00	1.32	2.09	0.28	0.73	1.01	1.30	2.10
PACEMAKER	112	0.00	0.41	0.72	1.37	3.25	0.20	0.61	0.90	1.21	2.17	0.21	0.65	0.84	1.16	1.87
CAROTID ENDARTERECTOMY	73	0.00	0.00	0.85	1.33	2.90	0.00	0.14	0.74	1.28	2.43	0.00	0.42	0.86	1.38	2.86
HIP REPLACEMENT	763	0.00	0.53	0.94	1.44	2.77	0.19	0.67	0.96	1.31	2.12	0.26	0.71	0.94	1.26	1.91
REDUCT. OF HIP FRACTURE	276	0.00	0.56	0.86	1.22	2.05	0.31	0.68	0.92	1.19	1.76	0.38	0.77	0.96	1.12	1.58
PROSTATECTOMY	1576	0.00	0.00	0.73	1.57	3.56	0.00	0.49	0.91	1.40	2.63	0.00	0.57	0.92	1.29	2.21
CHOLECYSTECTOMY	714	0.00	0.49	0.95	1.54	2.68	0.00	0.62	0.93	1.37	2.22	0.22	0.67	0.98	1.27	1.93
HYSTERECTOMY	113	0.00	0.00	0.00	2.00	6.69	0.00	0.00	0.76	1.70	3.59	0.00	0.24	0.75	1.27	2.91

TABLE 4
SMR DISTRIBUTION FOR HOSPITALS WITH GREATER THAN 50 CASES
1990 STUDY, FY1989

CONDITIONS/PROCEDURES	NUMBER OF HOSPITALS	30 DAYS					90 DAYS					180 DAYS				
		2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%
OVERALL(< 750 CASES)	2746	0.50	0.87	1.04	1.23	1.73	0.58	0.89	1.03	1.17	1.54	0.61	0.89	1.01	1.14	1.44
OVERALL(>= 750 CASES)	2669	0.71	0.90	1.00	1.09	1.35	0.79	0.94	1.01	1.08	1.28	0.82	0.95	1.01	1.07	1.24
CONDITIONS																
AMI	1412	0.53	0.81	0.96	1.12	1.47	0.59	0.86	1.01	1.15	1.47	0.63	0.87	1.00	1.14	1.43
CHF	2293	0.47	0.80	0.97	1.18	1.69	0.58	0.86	1.00	1.14	1.48	0.66	0.89	1.02	1.14	1.40
PNEUMONIA/INFLUENZA	2179	0.45	0.77	0.97	1.19	1.67	0.54	0.85	1.01	1.18	1.55	0.60	0.86	1.02	1.18	1.51
COPD	324	0.21	0.68	0.99	1.32	2.13	0.44	0.78	1.04	1.27	1.91	0.49	0.84	1.04	1.24	1.66
TRANS. CEREBRAL ISCHEMIA	420	0.00	0.00	0.79	1.41	3.26	0.00	0.46	0.88	1.33	2.36	0.18	0.60	0.92	1.25	1.97
STROKE	1728	0.53	0.80	0.95	1.12	1.56	0.62	0.85	0.97	1.11	1.46	0.67	0.88	0.99	1.13	1.40
HIP FRACTURE	1126	0.24	0.67	0.95	1.30	2.04	0.39	0.75	0.98	1.21	1.71	0.46	0.78	0.97	1.18	1.59
SEPSIS	174	0.52	0.79	0.94	1.10	1.52	0.63	0.88	1.02	1.15	1.46	0.68	0.93	1.05	1.16	1.43
PROCEDURES																
ANGIOPLASTY	370	0.00	0.46	0.84	1.35	2.55	0.00	0.55	0.88	1.33	2.52	0.00	0.61	0.94	1.32	2.44
CABG	501	0.21	0.65	1.00	1.47	2.57	0.23	0.69	1.00	1.33	2.29	0.32	0.74	1.01	1.33	2.21
PACEMAKER	91	0.00	0.52	0.74	1.12	2.31	0.00	0.56	0.83	1.15	2.14	0.20	0.68	0.81	1.16	1.87
CAROTID ENDARTERECTOMY	55	0.00	0.00	0.82	1.51	5.01	0.00	0.47	0.86	1.31	4.00	0.00	0.43	0.85	1.28	3.12
HIP REPLACEMENT	686	0.00	0.52	0.92	1.44	2.46	0.00	0.65	0.94	1.27	1.95	0.21	0.67	0.94	1.19	1.75
REDUCT. OF HIP FRACTURE	246	0.19	0.57	0.91	1.23	1.96	0.31	0.71	0.96	1.19	1.74	0.41	0.78	0.96	1.13	1.53
PROSTATECTOMY	1570	0.00	0.00	0.67	1.50	3.46	0.00	0.47	0.86	1.36	2.67	0.00	0.58	0.93	1.28	2.15
CHOLECYSTECTOMY	680	0.00	0.53	0.94	1.53	2.90	0.00	0.62	0.97	1.36	2.15	0.22	0.66	0.95	1.26	1.98
HYSTERECTOMY	101	0.00	0.00	0.00	1.80	5.44	0.00	0.00	0.78	1.60	4.21	0.00	0.00	0.91	1.38	2.99

TABLE 4
SMR DISTRIBUTION FOR HOSPITALS WITH GREATER THAN 50 CASES
1990 STUDY, FY1988

CONDITIONS/PROCEDURES	NUMBER OF HOSPITALS	30 DAYS					90 DAYS					180 DAYS				
		2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%
OVERALL(< 750 CASES)	2838	0.46	0.89	1.05	1.23	1.75	0.54	0.90	1.03	1.16	1.57	0.59	0.90	1.02	1.14	1.45
OVERALL(>= 750 CASES)	2693	0.73	0.90	1.00	1.10	1.35	0.79	0.94	1.01	1.09	1.27	0.82	0.95	1.01	1.08	1.24
CONDITIONS																
AMI	1414	0.56	0.82	0.96	1.12	1.41	0.63	0.87	1.01	1.14	1.42	0.65	0.89	1.00	1.13	1.39
CHF	2246	0.45	0.79	0.97	1.18	1.61	0.60	0.86	1.00	1.14	1.43	0.68	0.90	1.02	1.13	1.37
PNEUMONIA/INFLUENZA	2069	0.44	0.79	0.97	1.17	1.68	0.57	0.85	1.01	1.17	1.59	0.61	0.87	1.01	1.16	1.53
COPD	310	0.21	0.67	0.92	1.30	2.17	0.39	0.79	0.98	1.20	1.81	0.51	0.82	0.99	1.19	1.59
TRANS. CEREBRAL ISCHEMIA	495	0.00	0.00	0.84	1.48	2.94	0.00	0.48	0.92	1.39	2.28	0.21	0.60	0.92	1.27	1.92
STROKE	1726	0.51	0.79	0.95	1.12	1.56	0.60	0.84	0.98	1.13	1.44	0.64	0.88	1.00	1.13	1.42
HIP FRACTURE	1119	0.24	0.65	0.96	1.27	2.07	0.40	0.78	0.98	1.21	1.77	0.47	0.80	0.98	1.17	1.64
SEPSIS	133	0.58	0.77	0.92	1.08	1.64	0.56	0.86	1.00	1.13	1.54	0.67	0.88	1.02	1.14	1.53
PROCEDURES																
ANGIOPLASTY	297	0.00	0.50	0.87	1.35	2.60	0.00	0.59	0.91	1.34	2.50	0.00	0.65	0.95	1.31	2.25
CABG	478	0.21	0.68	0.98	1.39	2.40	0.32	0.73	1.00	1.36	2.12	0.38	0.75	1.01	1.31	2.04
PACEMAKER	83	0.00	0.34	0.65	1.04	1.75	0.01	0.54	0.85	1.03	1.70	0.23	0.69	0.87	1.10	1.57
CAROTID ENDARTERECTOMY	69	0.00	0.00	0.60	1.23	3.30	0.00	0.33	0.62	1.09	2.50	0.00	0.44	0.68	1.16	1.87
HIP REPLACEMENT	670	0.00	0.49	0.95	1.40	2.65	0.00	0.66	1.01	1.31	2.15	0.24	0.70	0.96	1.24	1.87
REDUCT. OF HIP FRACTURE	259	0.00	0.61	0.91	1.26	2.16	0.38	0.74	0.96	1.21	1.94	0.44	0.77	0.96	1.16	1.79
PROSTATECTOMY	1619	0.00	0.00	0.78	1.53	3.69	0.00	0.54	0.92	1.39	2.57	0.00	0.61	0.93	1.30	2.21
CHOLECYSTECTOMY	642	0.00	0.50	0.96	1.44	3.04	0.00	0.61	0.96	1.36	2.26	0.25	0.66	0.96	1.27	2.01
HYSTERECTOMY	90	0.00	0.00	0.00	1.57	5.00	0.00	0.00	0.68	1.43	2.83	0.00	0.28	0.67	1.15	2.88

TABLE 5: MULTIPLICATIVE FACTORS FOR THE CALCULATION OF THE BOUNDS FOR PREDICTION INTERVALS

(n is the number of cases at your hospital and p is the predicted mortality rate)

	99% Prediction Interval					95% Prediction Interval					75% Prediction Interval				
	Factor for Upper Bound					Factor for Upper Bound					Factor for Upper Bound				
p	1%	5%	10%	20%	40%	1%	5%	10%	20%	40%	1%	5%	10%	20%	40%
n															
25	2.95	2.73	2.68	2.63	2.59	2.15	2.04	2.01	1.99	1.97	1.17	1.16	1.16	1.15	1.15
50	2.76	2.65	2.63	2.60	2.58	2.05	2.00	1.99	1.97	1.96	1.16	1.15	1.15	1.15	1.15
75	2.70	2.63	2.61	2.59	2.58	2.02	1.99	1.98	1.97	1.96	1.16	1.15	1.15	1.15	1.15
100	2.67	2.61	2.60	2.59	2.58	2.01	1.98	1.97	1.97	1.96	1.16	1.15	1.15	1.15	1.15
150	2.64	2.60	2.59	2.59	2.58	1.99	1.97	1.97	1.96	1.96	1.15	1.15	1.15	1.15	1.15
200	2.62	2.60	2.59	2.58	2.58	1.98	1.97	1.97	1.96	1.96	1.15	1.15	1.15	1.15	1.15
300	2.61	2.59	2.58	2.58	2.58	1.98	1.97	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
400	2.60	2.59	2.58	2.58	2.58	1.97	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
500	2.59	2.58	2.58	2.58	2.58	1.97	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
750	2.59	2.58	2.58	2.58	2.58	1.97	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
1000	2.59	2.58	2.58	2.58	2.58	1.96	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
2000	2.58	2.58	2.58	2.58	2.58	1.96	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
5000	2.58	2.58	2.58	2.58	2.58	1.96	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15
	Factor for Lower Bound					Factor for Lower Bound					Factor for Lower Bound				
p	1%	5%	10%	20%	40%	1%	5%	10%	20%	40%	1%	5%	10%	20%	40%
n															
25	-2.21	-2.42	-2.48	-2.52	-2.56	-1.77	-1.88	-1.91	-1.93	-1.95	-1.13	-1.14	-1.14	-1.15	-1.15
50	-2.39	-2.50	-2.53	-2.55	-2.57	-1.87	-1.92	-1.93	-1.95	-1.96	-1.14	-1.15	-1.15	-1.15	-1.15
75	-2.45	-2.52	-2.54	-2.56	-2.57	-1.90	-1.93	-1.94	-1.95	-1.96	-1.14	-1.15	-1.15	-1.15	-1.15
100	-2.48	-2.54	-2.55	-2.56	-2.57	-1.91	-1.94	-1.95	-1.95	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
150	-2.51	-2.55	-2.56	-2.57	-2.57	-1.93	-1.95	-1.95	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
200	-2.53	-2.56	-2.56	-2.57	-2.57	-1.94	-1.95	-1.95	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
300	-2.54	-2.56	-2.57	-2.57	-2.57	-1.94	-1.95	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
400	-2.55	-2.57	-2.57	-2.57	-2.57	-1.95	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
500	-2.56	-2.57	-2.57	-2.57	-2.58	-1.95	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
750	-2.56	-2.57	-2.57	-2.57	-2.58	-1.95	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
1000	-2.57	-2.57	-2.57	-2.57	-2.58	-1.96	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
2000	-2.57	-2.57	-2.57	-2.58	-2.58	-1.96	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15
5000	-2.57	-2.58	-2.58	-2.58	-2.58	-1.96	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15

Medicare Hospital Information

ATLANTIC CITY HOSPITAL

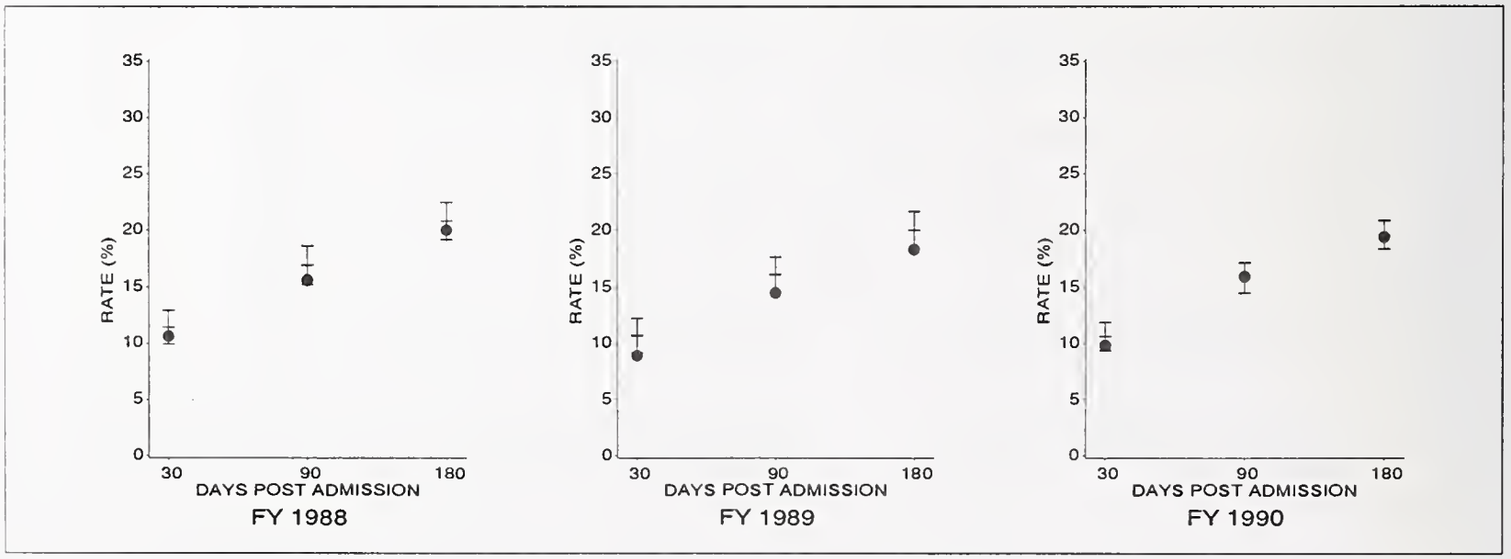
1925 PACIFIC AVE
ATLANTIC CITY, NJ 08401
Medicare Provider Number: 310064

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	4114	9.8	10.6	0.6	15.9	15.8	0.7	19.4	19.6	0.6
CONDITIONS:										
Acute Myocardial Infarction	184	23.4	24.2	3.5	27.2	27.1	3.4	31.0	29.8	3.7
Congestive Heart Failure	297	12.1	16.1	4.1	23.9	24.9	3.3	31.0	31.3	3.2
Pneumonia/Influenza	142	23.2	19.9	5.0	30.3	27.0	5.7	32.4	31.4	5.0
Chronic Obstructive Pulmonary Disease	68	4.4	9.6	5.4	10.3	16.2	6.2	22.1	20.9	7.0
Transient Cerebral Ischemia	83	1.2	2.0	1.9	4.8	4.5	2.9	12.0	7.3	4.9
Stroke	181	21.5	23.6	3.7	29.3	30.4	3.5	33.1	34.0	3.7
Hip Fracture	93	6.5	6.7	2.7	9.7	11.6	4.4	10.8	15.0	6.1
Sepsis	48	35.4	35.4	-----	45.8	46.2	-----	50.0	52.0	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	41	2.4	3.5	-----	2.4	6.5	-----	4.9	9.1	-----
Carotid Endarterectomy	4	25.0	2.0	-----	25.0	3.6	-----	50.0	5.1	-----
Hip Replacement/Reconstruction	47	4.3	3.4	-----	4.3	6.3	-----	4.3	8.5	-----
Open Reduction of Hip Fracture	58	5.2	6.4	3.5	10.3	11.6	5.0	12.1	15.1	6.5
Prostatectomy	108	0.0	1.2	2.6	3.7	2.8	1.8	3.7	4.8	2.4
Cholecystectomy	40	0.0	3.3	-----	12.5	6.0	-----	12.5	7.9	-----
Hysterectomy	20	0.0	0.2	-----	0.0	0.5	-----	5.0	0.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ATLANTIC CITY HOSPITAL
Medicare Provider Number: 310064

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.4 years
Proportion female	56.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	21.6 %
Transferred from skilled nursing facility	7.1 %
Admitted for elective procedure	14.0 %
Admitted for emergency	74.4 %

COMORBIDITIES:

Cancer	8.8 %
Chronic cardiovascular disease	45.5 %
Chronic liver disease	0.9 %
Chronic renal disease	2.6 %
Chronic pulmonary disease	15.9 %
Cerebrovascular degeneration	3.8 %
Diabetes mellitus	8.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	77.3%
State	13.3%
Outside State	9.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.7 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	470
Occupancy Rate	90.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	29.4 %
Case Mix Index (CMI)	1.1843

STAFFING:

Total Number of Physicians	225
Percent of Physicians Board Certified Specialists	62.7 %
Medical Residents/Interns	29
Registered Nurses	512
Licensed Practical Nurses	118

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

BARNERT MEMORIAL HOSPITAL CENTER

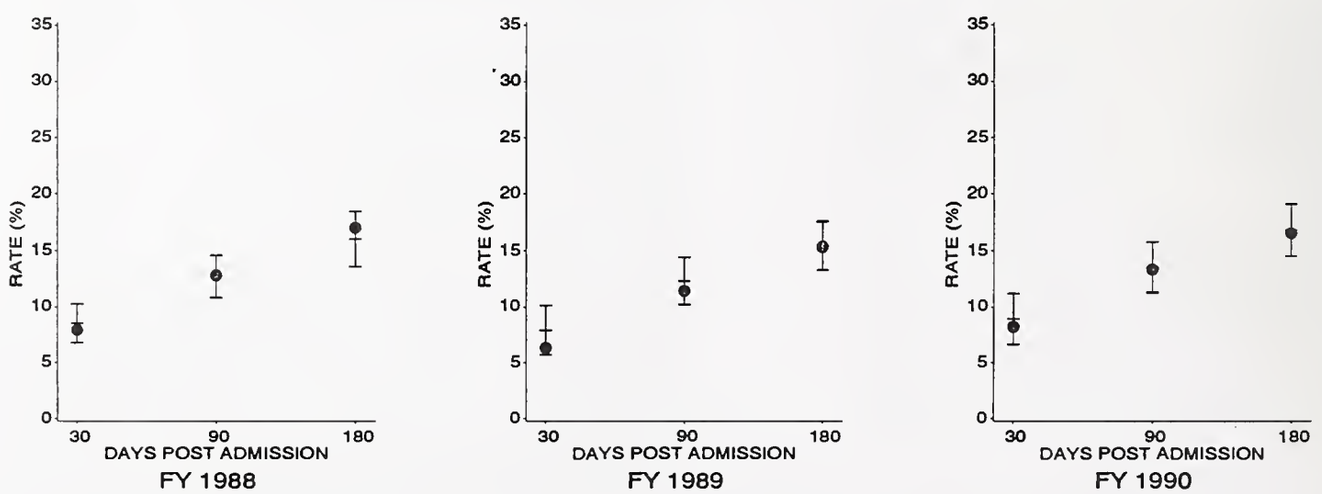
680 BROADWAY
PATERSON, NJ 07514
Medicare Provider Number: 310026

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	1136	8.2	8.9	1.1	13.3	13.5	1.1	16.5	16.8	1.2
CONDITIONS:										
Acute Myocardial Infarction	27	33.3	23.8	-----	33.3	27.1	-----	37.0	29.8	-----
Congestive Heart Failure	86	11.6	14.2	6.4	18.6	22.6	7.5	19.8	28.5	8.8
Pneumonia/Influenza	50	20.0	13.8	-----	22.0	18.3	-----	28.0	21.5	-----
Chronic Obstructive Pulmonary Disease	9	11.1	9.7	-----	11.1	15.6	-----	11.1	20.0	-----
Transient Cerebral Ischemia	23	0.0	1.7	-----	8.7	3.7	-----	13.0	5.9	-----
Stroke	55	7.3	18.0	7.5	12.7	24.7	8.4	23.6	28.6	6.9
Hip Fracture	14	14.3	7.7	-----	14.3	13.9	-----	21.4	18.0	-----
Sepsis	21	14.3	26.0	-----	38.1	33.5	-----	52.4	37.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	10	20.0	4.0	-----	20.0	7.9	-----	20.0	11.3	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	6	0.0	3.6	-----	0.0	7.2	-----	0.0	10.3	-----
Open Reduction of Hip Fracture	7	28.6	8.3	-----	28.6	15.6	-----	28.6	20.7	-----
Prostatectomy	16	0.0	1.9	-----	0.0	3.5	-----	0.0	5.3	-----
Cholecystectomy	15	0.0	2.6	-----	0.0	4.6	-----	0.0	5.9	-----
Hysterectomy	3	0.0	0.6	-----	0.0	1.3	-----	0.0	2.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



BARNERT MEMORIAL HOSPITAL CENTER

Medicare Provider Number: 310026

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	71.9 years
Proportion female	58.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	35.4 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	13.1 %
Admitted for emergency	68.1 %

COMORBIDITIES:

Cancer	4.9 %
Chronic cardiovascular disease	39.3 %
Chronic liver disease	1.1 %
Chronic renal disease	2.2 %
Chronic pulmonary disease	16.4 %
Cerebrovascular degeneration	3.8 %
Diabetes mellitus	11.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	74.5%
State	23.1%
Outside State	2.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	13.6 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	226
Occupancy Rate	79.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	24.9 %
Case Mix Index (CMI)	1.2397

STAFFING:

Total Number of Physicians	142
Percent of Physicians Board Certified Specialists	69.0 %
Medical Residents/Interns	0
Registered Nurses	147
Licensed Practical Nurses	34

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

BAYONNE HOSPITAL

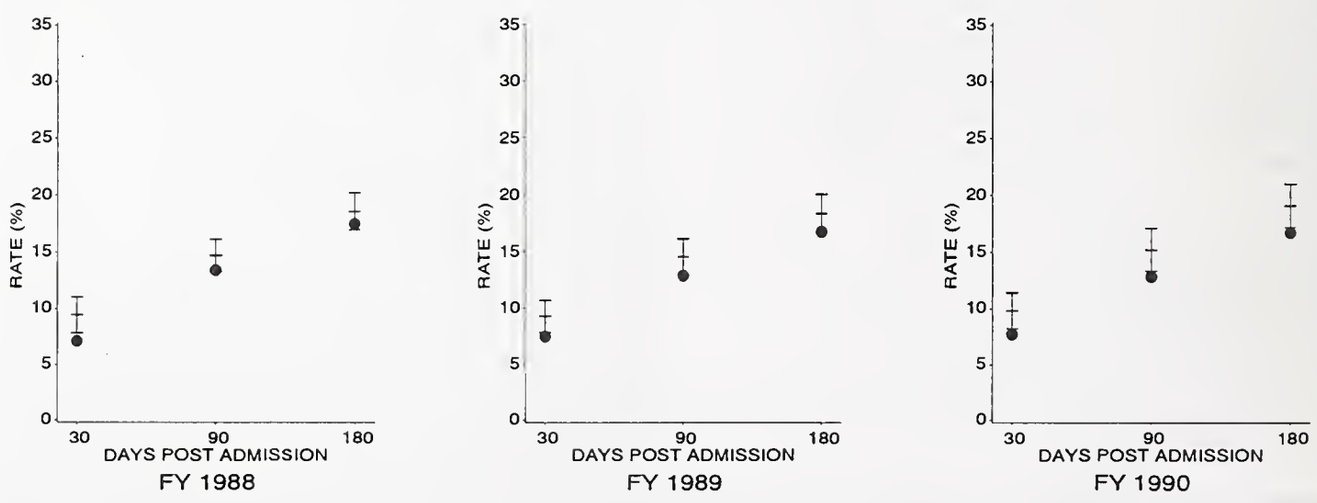
29 EAST 29TH ST
BAYONNE, NJ 07002
Medicare Provider Number: 310025

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2680	7.7	9.8	0.8	12.8	15.2	1.0	16.7	19.1	1.0
CONDITIONS:										
Acute Myocardial Infarction	71	36.6	32.4	7.4	39.4	35.8	6.7	43.7	38.9	6.8
Congestive Heart Failure	211	9.5	15.3	3.6	16.1	24.6	4.5	22.3	31.2	4.8
Pneumonia/Influenza	93	17.2	16.0	4.0	23.7	21.9	4.8	24.7	25.6	4.8
Chronic Obstructive Pulmonary Disease	61	3.3	11.0	5.1	6.6	18.3	7.0	8.2	23.1	8.0
Transient Cerebral Ischemia	63	0.0	1.6	2.1	1.6	3.5	2.9	3.2	5.8	3.6
Stroke	113	14.2	18.8	5.2	22.1	25.8	5.1	28.3	29.6	4.5
Hip Fracture	46	6.5	7.8	-----	17.4	13.5	-----	17.4	17.1	-----
Sepsis	27	25.9	26.4	-----	33.3	34.6	-----	44.4	39.0	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	15	0.0	3.3	-----	0.0	6.9	-----	0.0	10.0	-----
Carotid Endarterectomy	2	0.0	0.8	-----	0.0	1.4	-----	0.0	2.2	-----
Hip Replacement/Reconstruction	20	5.0	5.5	-----	5.0	9.9	-----	5.0	12.6	-----
Open Reduction of Hip Fracture	28	3.6	6.9	-----	17.9	12.1	-----	17.9	15.6	-----
Prostatectomy	64	0.0	1.0	1.4	1.6	2.2	2.0	3.1	3.8	3.0
Cholecystectomy	56	5.4	3.4	3.0	5.4	5.8	3.4	8.9	7.3	3.8
Hysterectomy	17	0.0	0.4	-----	0.0	0.9	-----	0.0	1.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



BAYONNE HOSPITAL
Medicare Provider Number: 310025

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.5 years
Proportion female	59.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	32.0 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	13.9 %
Admitted for emergency	69.2 %

COMORBIDITIES:

Cancer	9.1 %
Chronic cardiovascular disease	39.3 %
Chronic liver disease	1.1 %
Chronic renal disease	3.6 %
Chronic pulmonary disease	16.8 %
Cerebrovascular degeneration	3.7 %
Diabetes mellitus	11.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	95.2%
State	3.3%
Outside State	1.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	14.0 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	299
Occupancy Rate	92.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	46.9 %
Case Mix Index (CMI)	1.1454

STAFFING:

Total Number of Physicians	144
Percent of Physicians Board Certified Specialists	54.2 %
Medical Residents/Interns	0
Registered Nurses	215
Licensed Practical Nurses	98

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

BAYSHORE COMMUNITY HOSPITAL

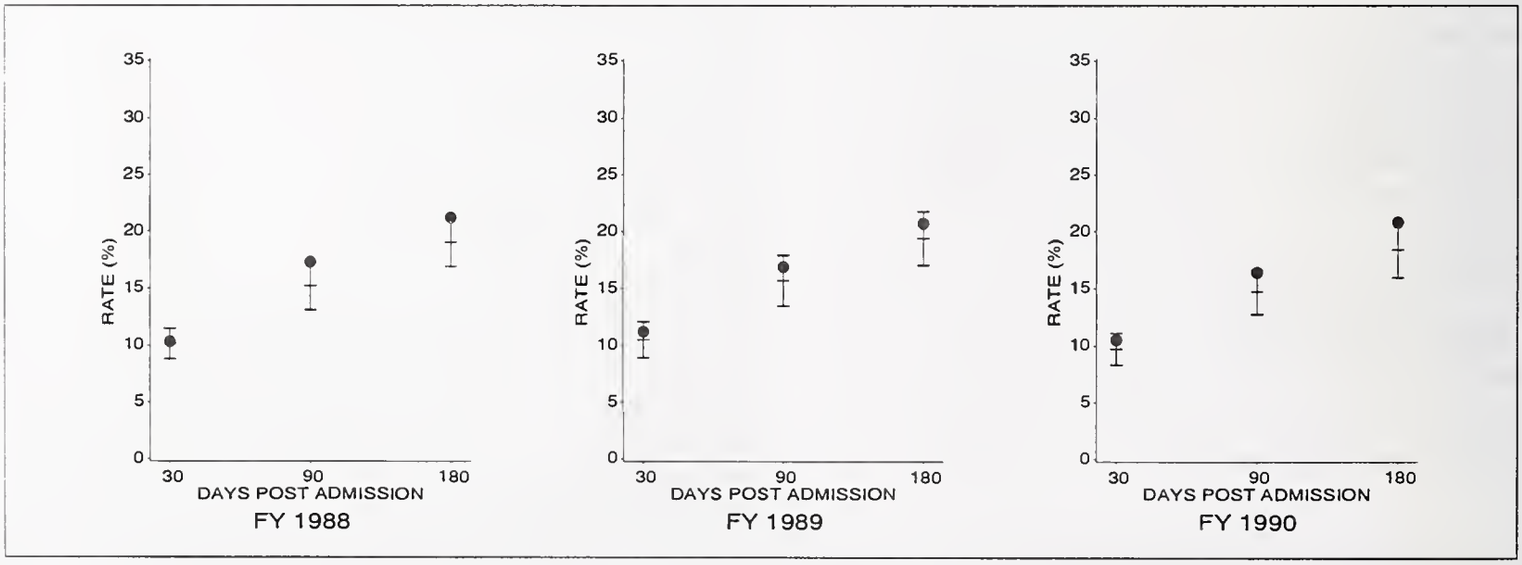
727 N BEERS ST
HOLMDEL, NJ 07733
Medicare Provider Number: 310112

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	2173	10.5	9.7	0.7	16.4	14.7	1.0	20.8	18.4	1.2
CONDITIONS:										
Acute Myocardial Infarction	77	32.5	29.0	6.1	36.4	32.3	6.9	39.0	35.0	7.0
Congestive Heart Failure	155	13.5	14.7	3.7	25.2	23.3	5.4	36.1	29.5	6.0
Pneumonia/Influenza	80	25.0	15.4	7.0	31.3	20.8	7.2	32.5	24.5	6.9
Chronic Obstructive Pulmonary Disease	48	4.2	9.8	-----	16.7	16.2	-----	22.9	20.8	-----
Transient Cerebral Ischemia	74	1.4	1.7	1.8	4.1	3.8	2.4	6.8	6.1	2.9
Stroke	82	19.5	18.8	4.7	31.7	25.8	6.3	36.6	29.6	7.4
Hip Fracture	53	3.8	7.2	4.8	7.5	12.4	6.7	11.3	15.7	6.6
Sepsis	24	33.3	26.4	-----	45.8	35.4	-----	50.0	41.2	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	24	0.0	3.0	-----	4.2	6.0	-----	4.2	8.9	-----
Carotid Endarterectomy	4	0.0	0.7	-----	0.0	1.5	-----	0.0	2.6	-----
Hip Replacement/Reconstruction	18	11.1	3.8	-----	16.7	6.8	-----	27.8	9.2	-----
Open Reduction of Hip Fracture	43	2.3	5.9	-----	4.7	10.5	-----	7.0	13.7	-----
Prostatectomy	65	0.0	1.3	1.7	1.5	3.0	2.5	7.7	5.0	4.5
Cholecystectomy	28	7.1	3.0	-----	10.7	5.2	-----	10.7	6.6	-----
Hysterectomy	12	0.0	0.1	-----	0.0	0.3	-----	0.0	0.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



BAYSHORE COMMUNITY HOSPITAL
Medicare Provider Number: 310112

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.9 years
Proportion female	60.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	19.5 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	15.4 %
Admitted for emergency	13.8 %

COMORBIDITIES:

Cancer	7.3 %
Chronic cardiovascular disease	49.2 %
Chronic liver disease	0.9 %
Chronic renal disease	3.0 %
Chronic pulmonary disease	17.2 %
Cerebrovascular degeneration	3.5 %
Diabetes mellitus	9.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	82.7%
State	13.3%
Outside State	4.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	12.2 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	218
Occupancy Rate	89.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	40.4 %
Case Mix Index (CMI)	1.1488

STAFFING:

Total Number of Physicians	160
Percent of Physicians Board Certified Specialists	59.4 %
Medical Residents/Interns	0
Registered Nurses	161
Licensed Practical Nurses	31

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

* Not used in calculating mortality rates

BERGEN PINES COUNTY HOSPITAL

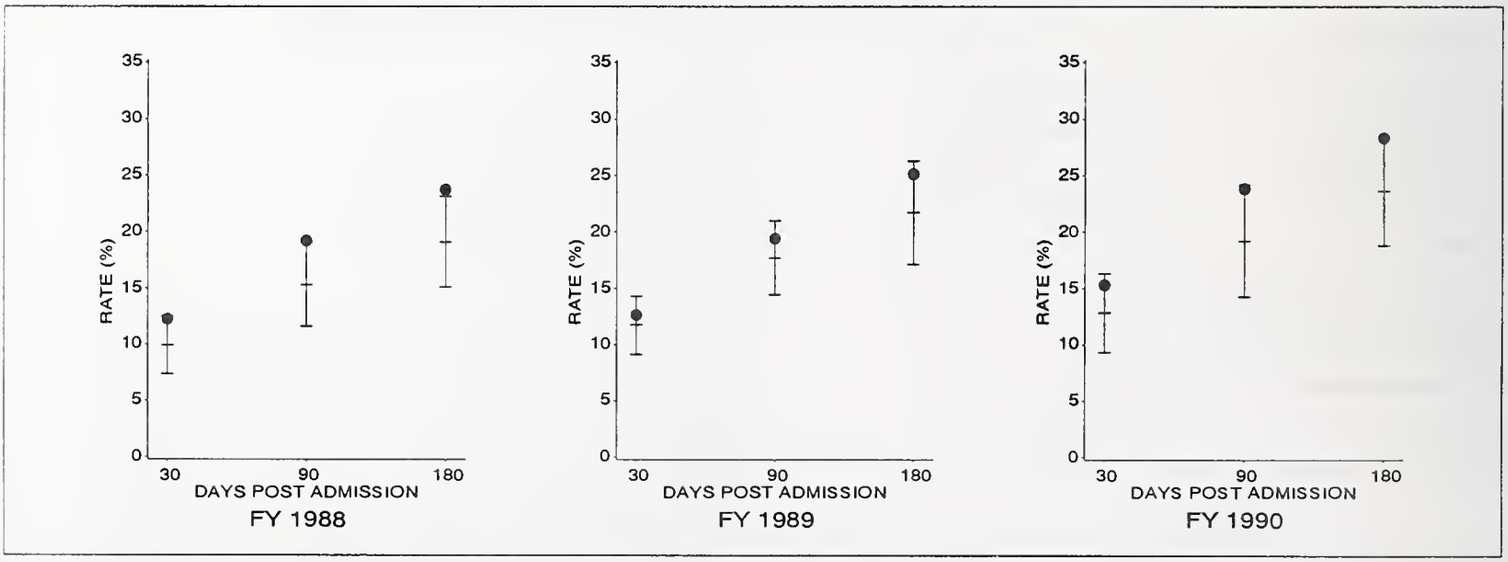
EAST RIDGEWOOD AVE
PARAMUS, NJ 07652
Medicare Provider Number: 310058

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	660	15.3	12.8	1.8	23.8	19.2	2.5	28.3	23.6	2.4
CONDITIONS:										
Acute Myocardial Infarction	11	54.5	39.2	-----	63.6	44.1	-----	63.6	47.8	-----
Congestive Heart Failure	19	42.1	16.5	-----	52.6	26.0	-----	52.6	32.6	-----
Pneumonia/Influenza	41	31.7	19.9	-----	39.0	27.2	-----	43.9	31.9	-----
Chronic Obstructive Pulmonary Disease	10	0.0	8.3	-----	10.0	14.3	-----	30.0	20.0	-----
Transient Cerebral Ischemia	13	0.0	2.9	-----	7.7	6.8	-----	30.8	11.3	-----
Stroke	14	14.3	26.1	-----	50.0	35.5	-----	50.0	40.6	-----
Hip Fracture	16	18.8	5.6	-----	25.0	9.6	-----	37.5	12.7	-----
Sepsis	14	42.9	23.8	-----	57.1	31.0	-----	57.1	35.7	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	8	12.5	6.5	-----	25.0	12.2	-----	37.5	16.6	-----
Open Reduction of Hip Fracture	6	16.7	4.2	-----	16.7	7.7	-----	16.7	10.3	-----
Prostatectomy	10	0.0	1.0	-----	0.0	2.5	-----	0.0	4.5	-----
Cholecystectomy	1	100.0	0.7	-----	100.0	1.1	-----	100.0	1.3	-----
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



BERGEN PINES COUNTY HOSPITAL
Medicare Provider Number: 310058

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.1 years
Proportion female	54.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	10.2 %
Transferred from skilled nursing facility	7.9 %
Admitted for elective procedure	1.2 %
Admitted for emergency	13.6 %

COMORBIDITIES:

Cancer	4.8 %
Chronic cardiovascular disease	33.0 %
Chronic liver disease	1.7 %
Chronic renal disease	2.9 %
Chronic pulmonary disease	10.9 %
Cerebrovascular degeneration	16.5 %
Diabetes mellitus	4.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	85.6%
State	11.3%
Outside State	3.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	14.6 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	1045
Occupancy Rate	85.0 %
Ownership/Control	Local Government
Medicare Discharges	28.0 %
Case Mix Index (CMI)	1.1996

STAFFING:

Total Number of Physicians	111
Percent of Physicians Board Certified Specialists	50.5 %
Medical Residents/Interns	45
Registered Nurses	326
Licensed Practical Nurses	97

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	Yes

*** Not used in calculating mortality rates**

BETH ISRAEL HOSPITAL

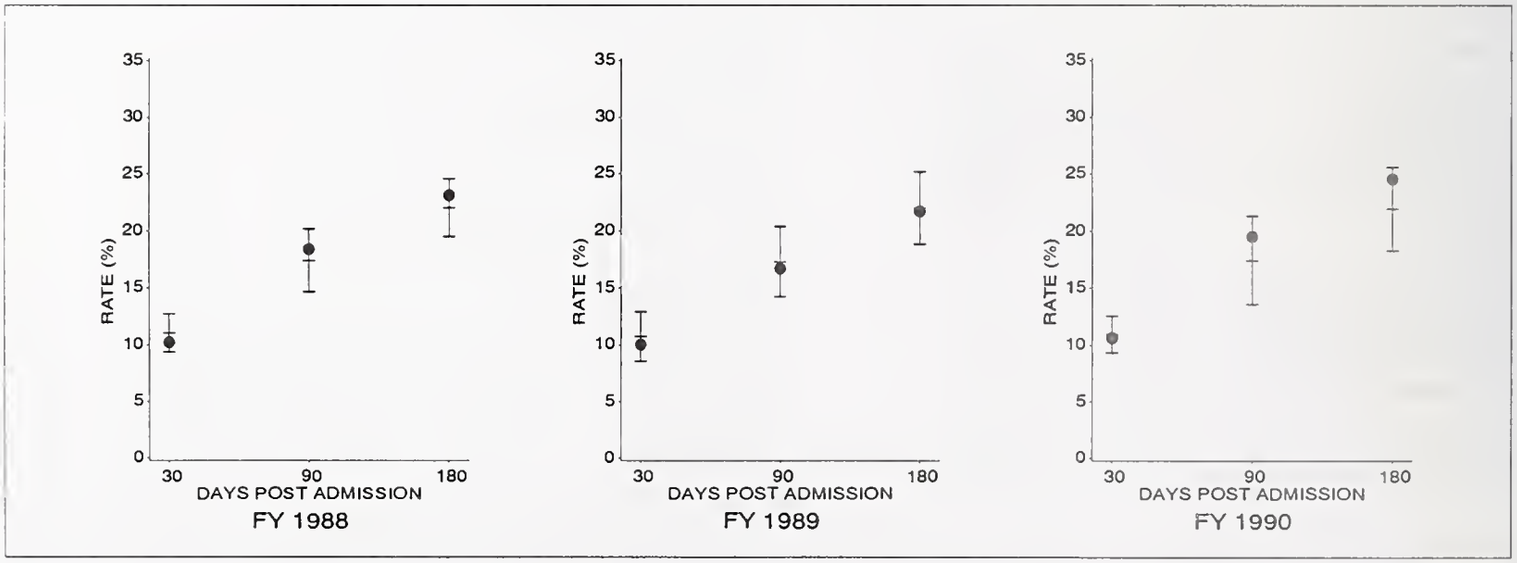
70 PARKER AVE
PASSAIC, NJ 07055
Medicare Provider Number: 310020

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1688	10.6	10.9	0.8	19.5	17.4	1.9	24.5	21.9	1.8
CONDITIONS:										
Acute Myocardial Infarction	34	29.4	29.9	-----	44.1	34.1	-----	44.1	37.1	-----
Congestive Heart Failure	91	15.4	15.5	4.1	34.1	24.0	8.2	37.4	30.0	7.3
Pneumonia/Influenza	82	23.2	24.6	5.9	28.0	33.4	8.5	32.9	38.8	8.8
Chronic Obstructive Pulmonary Disease	9	0.0	9.3	-----	0.0	16.7	-----	0.0	22.8	-----
Transient Cerebral Ischemia	29	10.3	2.3	-----	10.3	5.2	-----	17.2	8.3	-----
Stroke	63	17.5	18.4	5.1	25.4	25.6	6.0	31.7	29.7	6.4
Hip Fracture	31	6.5	10.5	-----	19.4	18.6	-----	19.4	23.6	-----
Sepsis	16	12.5	32.0	-----	31.3	44.8	-----	37.5	51.0	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	22	9.1	3.2	-----	9.1	6.6	-----	13.6	9.8	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	12	0.0	5.9	-----	16.7	11.0	-----	16.7	15.0	-----
Open Reduction of Hip Fracture	15	13.3	12.3	-----	26.7	22.5	-----	26.7	28.8	-----
Prostatectomy	45	0.0	1.4	-----	0.0	3.4	-----	0.0	5.5	-----
Cholecystectomy	26	3.8	2.6	-----	3.8	4.6	-----	3.8	6.0	-----
Hysterectomy	5	0.0	0.9	-----	0.0	2.1	-----	0.0	3.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



BETH ISRAEL HOSPITAL
Medicare Provider Number: 310020

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	76.8 years
Proportion female	61.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	38.6 %
Transferred from skilled nursing facility	14.7 %
Admitted for elective procedure	14.5 %
Admitted for emergency	41.0 %

COMORBIDITIES:

Cancer	11.8 %
Chronic cardiovascular disease	38.9 %
Chronic liver disease	0.9 %
Chronic renal disease	1.7 %
Chronic pulmonary disease	10.5 %
Cerebrovascular degeneration	5.8 %
Diabetes mellitus	10.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	62.4%
State	35.3%
Outside State	2.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.4 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	223
Occupancy Rate	64.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	41.7 %
Case Mix Index (CMI)	1.2035

STAFFING:

Total Number of Physicians	236
Percent of Physicians Board Certified Specialists	77.1 %
Medical Residents/Interns	0
Registered Nurses	107
Licensed Practical Nurses	6

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

BRIDGETON HOSPITAL

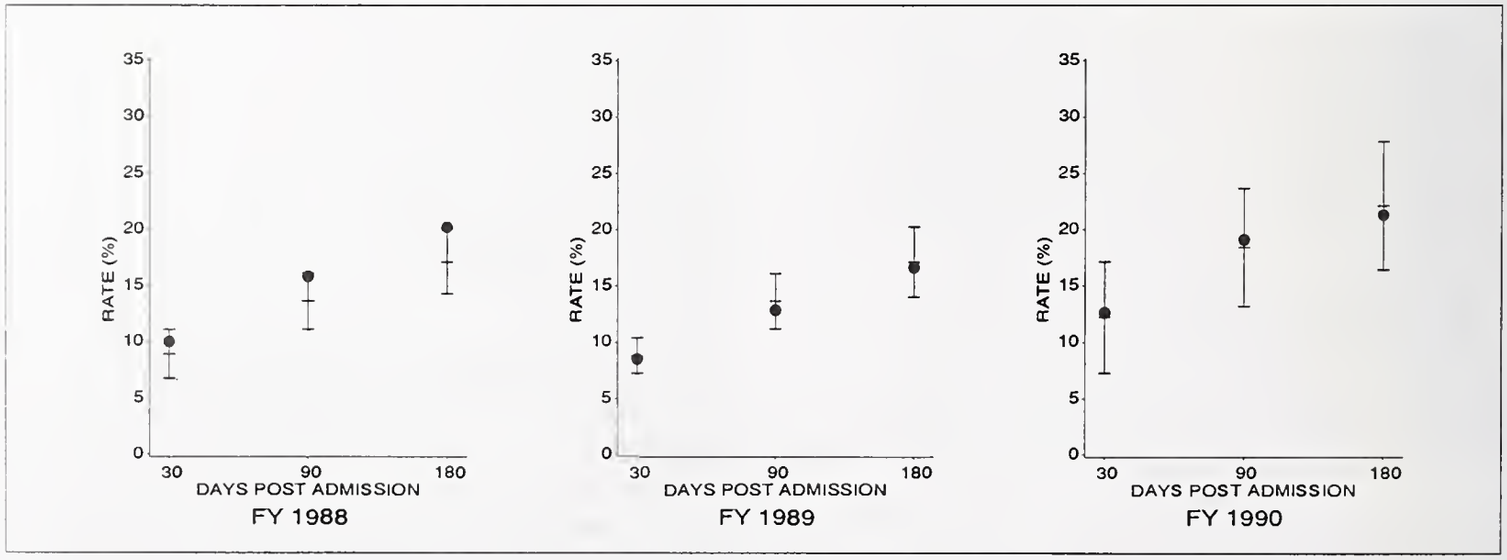
IRVING & MAGNOLIA AVES
BRIDGETON, NJ 08302
Medicare Provider Number: 310068

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	230	12.6	12.2	2.5	19.1	18.4	2.6	21.3	22.1	2.9
CONDITIONS:										
Acute Myocardial Infarction	14	57.1	31.8	-----	57.1	34.3	-----	57.1	36.1	-----
Congestive Heart Failure	8	12.5	17.6	-----	25.0	29.2	-----	25.0	34.7	-----
Pneumonia/Influenza	4	25.0	22.3	-----	25.0	31.7	-----	25.0	35.6	-----
Chronic Obstructive Pulmonary Disease	3	0.0	12.8	-----	33.3	24.5	-----	33.3	31.2	-----
Transient Cerebral Ischemia	7	0.0	2.0	-----	14.3	4.4	-----	14.3	6.9	-----
Stroke	7	28.6	22.6	-----	42.9	30.8	-----	42.9	34.1	-----
Hip Fracture	7	0.0	5.3	-----	14.3	10.7	-----	14.3	14.5	-----
Sepsis	6	50.0	34.9	-----	83.3	47.8	-----	83.3	52.8	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	4	0.0	2.5	-----	0.0	5.6	-----	0.0	8.1	-----
Open Reduction of Hip Fracture	2	0.0	5.1	-----	0.0	8.9	-----	0.0	10.8	-----
Prostatectomy	2	0.0	3.0	-----	0.0	6.9	-----	50.0	11.0	-----
Cholecystectomy	5	0.0	2.0	-----	0.0	3.6	-----	0.0	4.3	-----
Hysterectomy	1	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



BRIDGETON HOSPITAL
Medicare Provider Number: 310068

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.3 years
Proportion female	57.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	33.9 %
Transferred from skilled nursing facility	3.0 %
Admitted for elective procedure	29.1 %
Admitted for emergency	68.7 %

COMORBIDITIES:

Cancer	7.4 %
Chronic cardiovascular disease	40.9 %
Chronic liver disease	1.3 %
Chronic renal disease	5.7 %
Chronic pulmonary disease	18.7 %
Cerebrovascular degeneration	5.2 %
Diabetes mellitus	8.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	88.3%
State	9.0%
Outside State	2.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	12.4 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1987

PROFILE:

Total Beds	228
Ownership.Control	Private, Non-Profit
Case Mix Index (CMI)	1.2145

STAFFING:

Medical Residents/Interns	4
Registered Nurses	101
Licensed Practical Nurses	73

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	Yes
Hospice Care	No
Intensive Care Unit	Yes
Organ Transplant	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

BURDETE TOMLIN MEMORIAL HOSPITAL

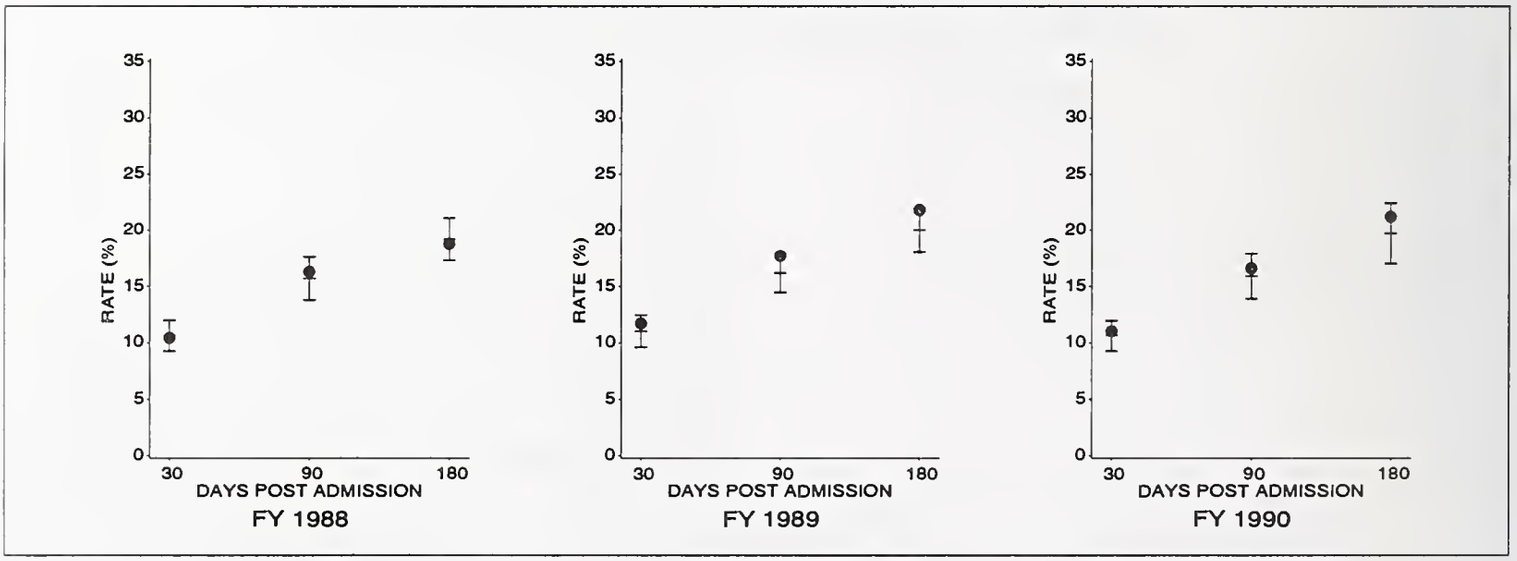
RT 9 STONE HARBOR BLVD
CAPE MAY COURT HOUSE, NJ 08210
Medicare Provider Number: 310011

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	2745	11.0	10.6	0.7	16.6	15.9	1.0	21.2	19.7	1.4
CONDITIONS:										
Acute Myocardial Infarction	95	24.2	24.1	4.7	28.4	27.2	5.4	31.6	29.9	6.1
Congestive Heart Failure	179	12.8	14.2	2.9	23.5	22.7	3.7	33.5	29.0	5.4
Pneumonia/Influenza	138	15.2	18.2	4.5	25.4	24.7	4.3	31.2	29.2	4.7
Chronic Obstructive Pulmonary Disease	45	17.8	8.8	-----	22.2	15.3	-----	24.4	20.4	-----
Transient Cerebral Ischemia	62	4.8	1.9	3.0	4.8	4.2	4.0	9.7	6.8	5.6
Stroke	135	18.5	18.7	3.4	25.9	25.8	3.8	27.4	29.8	4.4
Hip Fracture	62	3.2	7.8	4.8	8.1	13.6	6.0	14.5	17.6	6.2
Sepsis	45	35.6	36.0	-----	44.4	42.7	-----	48.9	47.4	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	8	0.0	5.5	-----	12.5	11.2	-----	12.5	16.3	-----
Carotid Endarterectomy	1	0.0	1.1	-----	100.0	2.0	-----	100.0	3.0	-----
Hip Replacement/Reconstruction	33	0.0	5.3	-----	0.0	9.7	-----	3.0	13.0	-----
Open Reduction of Hip Fracture	35	5.7	7.4	-----	14.3	13.0	-----	22.9	16.8	-----
Prostatectomy	94	2.1	1.5	1.6	7.4	3.6	3.2	10.6	6.0	4.3
Cholecystectomy	44	2.3	2.7	-----	4.5	4.7	-----	4.5	6.0	-----
Hysterectomy	21	0.0	0.5	-----	0.0	1.1	-----	4.8	1.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



BURDETE TOMLIN MEMORIAL HOSPITAL

Medicare Provider Number: 310011

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.6 years
Proportion female	55.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	25.0 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	10.3 %
Admitted for emergency	73.9 %

COMORBIDITIES:

Cancer	7.8 %
Chronic cardiovascular disease	47.8 %
Chronic liver disease	1.6 %
Chronic renal disease	2.1 %
Chronic pulmonary disease	22.9 %
Cerebrovascular degeneration	5.1 %
Diabetes mellitus	6.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	85.2%
State	5.9%
Outside State	8.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.3 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	224
Occupancy Rate	84.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	42.2 %
Case Mix Index (CMI)	1.2162

STAFFING:

Total Number of Physicians	146
Percent of Physicians Board Certified Specialists	71.2 %
Medical Residents/Interns	0
Registered Nurses	188
Licensed Practical Nurses	71

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

* Not used in calculating mortality rates

CENTRASTATE MEDICAL CENTER

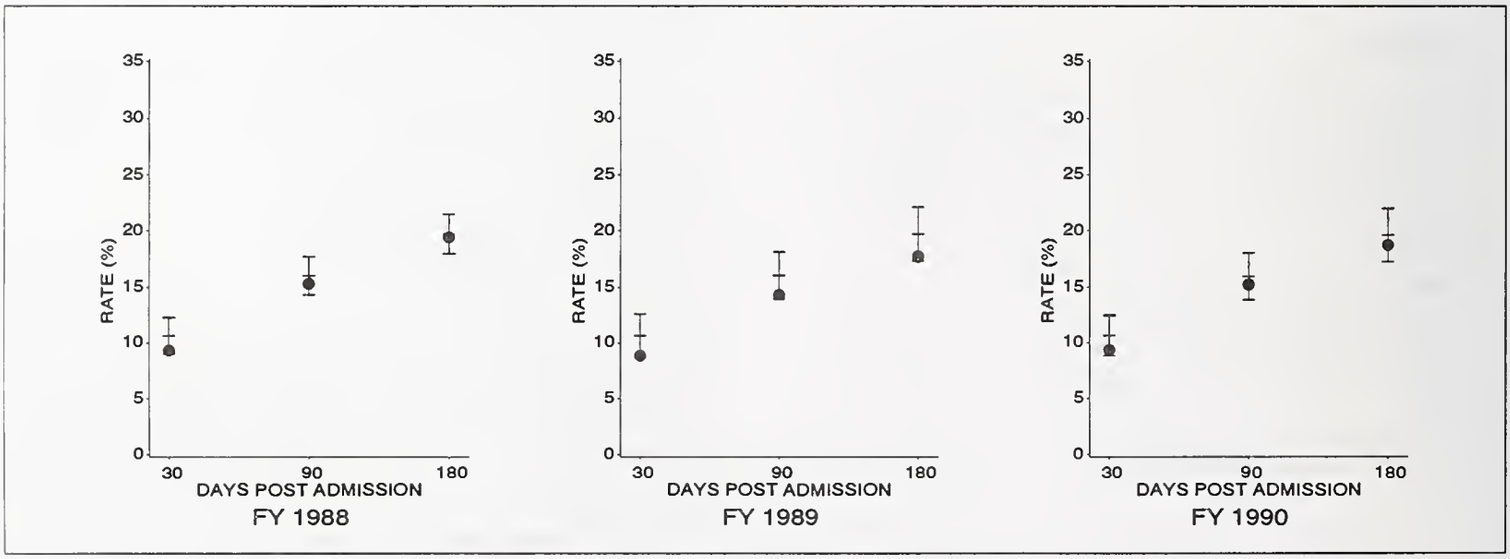
ROUTE 537 W MAIN ST
FREEHOLD, NJ 07728
Medicare Provider Number: 310111

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2309	9.3	10.6	0.9	15.2	15.9	1.1	18.7	19.6	1.2
CONDITIONS:										
Acute Myocardial Infarction	91	23.1	26.2	5.0	27.5	29.1	5.5	29.7	31.8	5.7
Congestive Heart Failure	152	9.2	15.7	4.3	17.1	24.8	5.3	27.0	31.3	6.2
Pneumonia/Influenza	123	17.9	18.8	4.0	22.8	25.3	5.0	30.1	29.6	5.4
Chronic Obstructive Pulmonary Disease	29	3.4	8.2	-----	13.8	14.0	-----	13.8	18.4	-----
Transient Cerebral Ischemia	62	0.0	2.0	2.5	6.5	4.6	3.5	11.3	7.5	5.1
Stroke	99	22.2	22.8	4.2	34.3	30.8	5.5	37.4	35.1	5.1
Hip Fracture	68	5.9	6.6	4.2	10.3	11.5	5.3	16.2	14.7	5.6
Sepsis	31	22.6	29.8	-----	29.0	38.3	-----	32.3	43.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	11	9.1	2.6	-----	27.3	5.2	-----	36.4	7.8	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	34	5.9	4.8	-----	8.8	8.8	-----	20.6	11.6	-----
Open Reduction of Hip Fracture	32	3.1	6.2	-----	6.3	11.1	-----	6.3	14.2	-----
Prostatectomy	99	0.0	0.9	1.3	1.0	2.0	1.8	3.0	3.4	1.9
Cholecystectomy	37	5.4	2.7	-----	5.4	4.7	-----	5.4	6.1	-----
Hysterectomy	12	0.0	1.5	-----	0.0	3.4	-----	0.0	5.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



CENTRASTATE MEDICAL CENTER

Medicare Provider Number: 310111

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.0 years
Proportion female	55.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	27.1 %
Transferred from skilled nursing facility	8.4 %
Admitted for elective procedure	12.6 %
Admitted for emergency	69.7 %

COMORBIDITIES:

Cancer	8.6 %
Chronic cardiovascular disease	39.7 %
Chronic liver disease	0.9 %
Chronic renal disease	2.8 %
Chronic pulmonary disease	12.2 %
Cerebrovascular degeneration	5.8 %
Diabetes mellitus	6.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	75.6%
State	18.8%
Outside State	5.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.8 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	248
Occupancy Rate	76.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	34.8 %
Case Mix Index (CMI)	1.2343

STAFFING:

Total Number of Physicians	169
Percent of Physicians Board Certified Specialists	84.6 %
Medical Residents/Interns	0
Registered Nurses	226
Licensed Practical Nurses	82

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

CHILTON MEMORIAL HOSPITAL

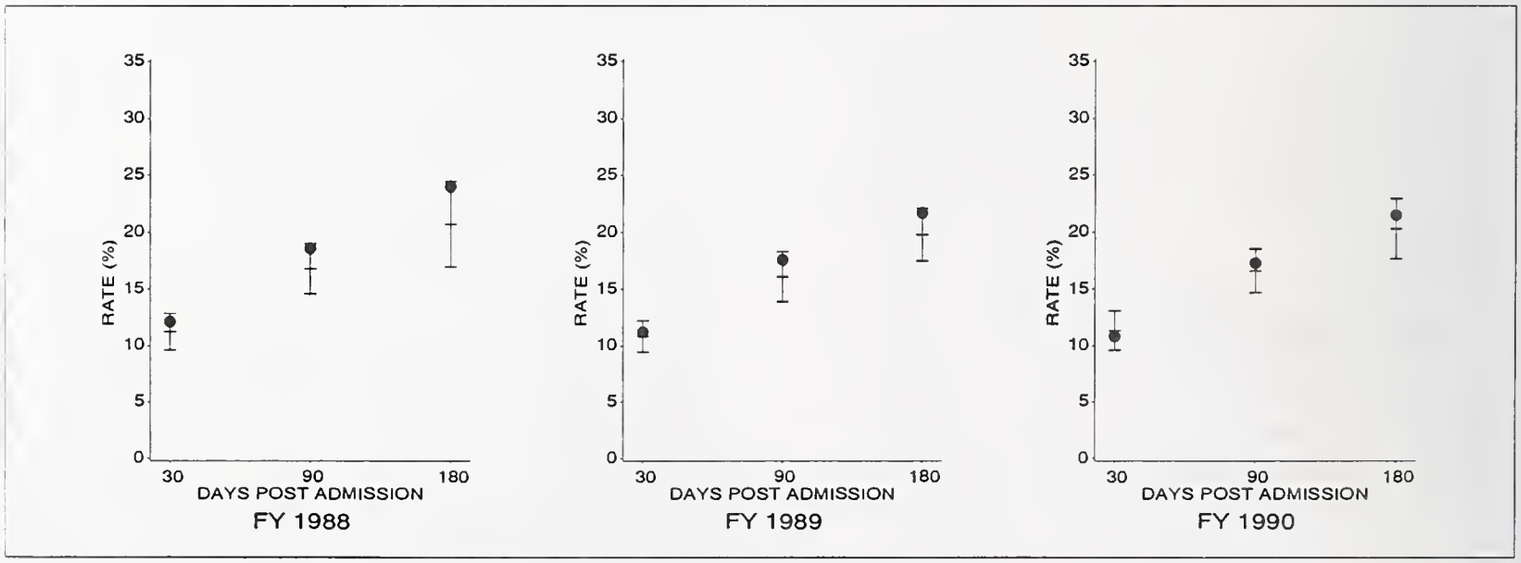
97 W PKWY
POMPTON PLAINS, NJ 07444
Medicare Provider Number: 310017

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2142	10.8	11.3	0.9	17.3	16.6	1.0	21.5	20.3	1.3
CONDITIONS:										
Acute Myocardial Infarction	72	29.2	26.8	8.6	31.9	29.6	8.9	36.1	32.2	9.0
Congestive Heart Failure	126	17.5	17.1	4.3	27.0	26.6	4.0	38.1	32.9	6.1
Pneumonia/Influenza	129	20.9	19.7	4.2	28.7	26.3	4.4	34.1	30.7	5.0
Chronic Obstructive Pulmonary Disease	22	0.0	6.3	-----	0.0	11.3	-----	0.0	15.7	-----
Transient Cerebral Ischemia	48	2.1	2.8	-----	4.2	5.7	-----	8.3	8.6	-----
Stroke	102	20.6	20.4	4.9	29.4	27.3	5.2	34.3	31.1	5.7
Hip Fracture	67	3.0	6.5	5.4	9.0	11.4	7.2	13.4	14.7	7.5
Sepsis	53	35.8	27.0	7.9	43.4	35.1	8.4	49.1	39.8	10.2
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	17	5.9	2.4	-----	17.6	5.1	-----	23.5	7.7	-----
Carotid Endarterectomy	1	0.0	2.2	-----	0.0	3.6	-----	0.0	4.5	-----
Hip Replacement/Reconstruction	35	11.4	3.8	-----	11.4	7.3	-----	11.4	9.9	-----
Open Reduction of Hip Fracture	21	0.0	5.4	-----	14.3	9.7	-----	19.0	12.6	-----
Prostatectomy	91	1.1	1.3	1.3	3.3	3.0	1.9	3.3	4.9	2.7
Cholecystectomy	38	0.0	3.0	-----	5.3	5.3	-----	5.3	6.9	-----
Hysterectomy	23	0.0	0.3	-----	0.0	0.8	-----	0.0	1.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



CHILTON MEMORIAL HOSPITAL

Medicare Provider Number: 310017

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	76.4 years
Proportion female	58.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	29.4 %
Transferred from skilled nursing facility	1.3 %
Admitted for elective procedure	18.8 %
Admitted for emergency	78.2 %

COMORBIDITIES:

Cancer	8.9 %
Chronic cardiovascular disease	47.3 %
Chronic liver disease	1.2 %
Chronic renal disease	2.3 %
Chronic pulmonary disease	16.7 %
Cerebrovascular degeneration	2.2 %
Diabetes mellitus	6.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	30.3%
State	65.3%
Outside State	4.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.5 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	248
Occupancy Rate	75.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	29.5 %
Case Mix Index (CMI)	1.3335

STAFFING:

Total Number of Physicians	194
Percent of Physicians Board Certified Specialists	82.0 %
Medical Residents/Interns	0
Registered Nurses	226
Licensed Practical Nurses	53

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

CHRIST HOSPITAL

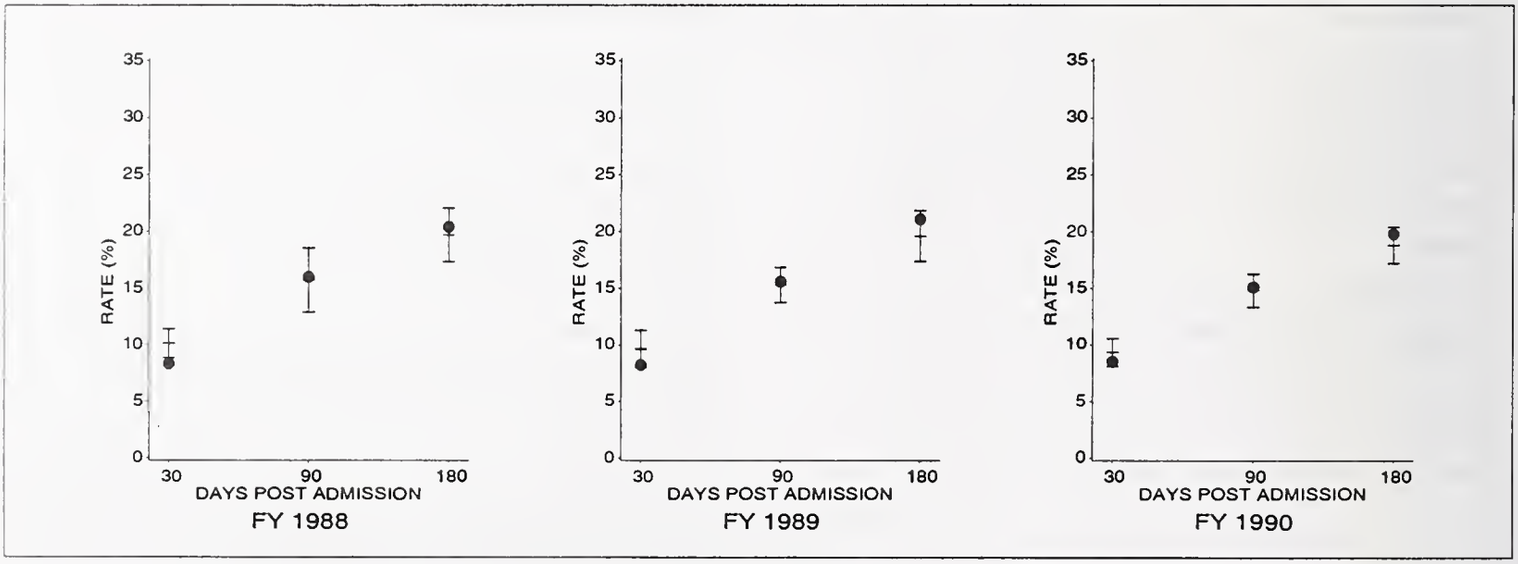
176 PALISADE AVE
JERSEY CITY, NJ 07306
Medicare Provider Number: 310016

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2340	8.5	9.3	0.6	15.1	14.8	0.7	19.8	18.8	0.8
CONDITIONS:										
Acute Myocardial Infarction	47	25.5	27.2	-----	25.5	30.2	-----	25.5	33.0	-----
Congestive Heart Failure	138	21.0	14.4	4.5	31.9	23.1	5.0	40.6	29.4	5.8
Pneumonia/Influenza	82	11.0	17.2	6.8	23.2	23.6	5.5	24.4	27.6	5.7
Chronic Obstructive Pulmonary Disease	78	6.4	9.6	4.0	11.5	16.2	5.5	16.7	20.7	5.4
Transient Cerebral Ischemia	42	2.4	2.3	-----	4.8	5.0	-----	4.8	7.9	-----
Stroke	87	16.1	17.8	4.9	26.4	24.8	4.8	35.6	28.5	6.3
Hip Fracture	37	5.4	5.9	-----	13.5	10.3	-----	18.9	13.1	-----
Sepsis	23	39.1	23.2	-----	56.5	31.9	-----	60.9	36.8	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	11	9.1	5.4	-----	18.2	10.7	-----	18.2	15.5	-----
Carotid Endarterectomy	8	0.0	1.9	-----	0.0	3.8	-----	0.0	5.7	-----
Hip Replacement/Reconstruction	26	0.0	2.9	-----	3.8	5.3	-----	3.8	7.0	-----
Open Reduction of Hip Fracture	22	9.1	5.3	-----	13.6	9.5	-----	22.7	12.4	-----
Prostatectomy	94	0.0	1.1	1.4	1.1	2.5	2.0	3.2	4.3	2.5
Cholecystectomy	31	6.5	2.3	-----	9.7	4.1	-----	9.7	5.5	-----
Hysterectomy	12	0.0	0.2	-----	0.0	0.5	-----	8.3	0.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



CHRIST HOSPITAL
Medicare Provider Number: 310016

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.4 years
Proportion female	56.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	45.1 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	30.0 %
Admitted for emergency	65.2 %

COMORBIDITIES:

Cancer	12.6 %
Chronic cardiovascular disease	39.6 %
Chronic liver disease	1.1 %
Chronic renal disease	3.0 %
Chronic pulmonary disease	15.6 %
Cerebrovascular degeneration	3.4 %
Diabetes mellitus	7.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	92.5%
State	5.2%
Outside State	2.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	14.7 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	402
Occupancy Rate	86.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	28.7 %
Case Mix Index (CMI)	1.2094

STAFFING:

Total Number of Physicians	236
Percent of Physicians Board Certified Specialists	62.3 %
Medical Residents/Interns	0
Registered Nurses	255
Licensed Practical Nurses	39

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

* Not used in calculating mortality rates

CLARA MAASS MEDICAL CENTER

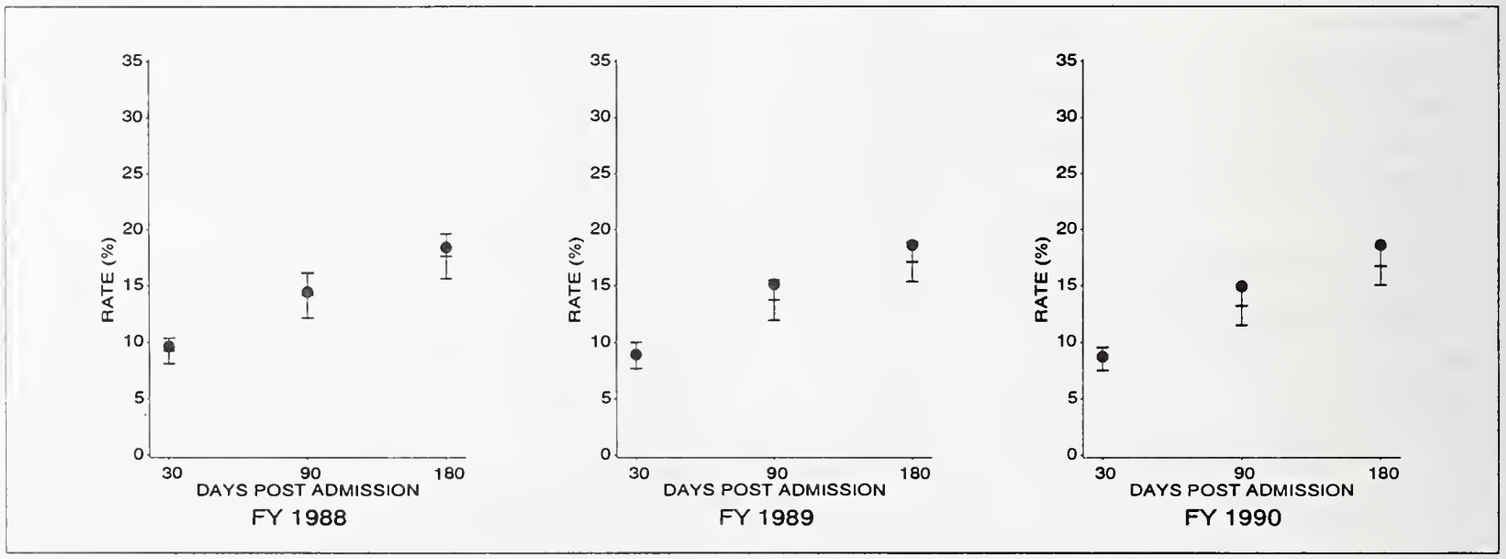
ONE FRANKLIN AVE
BELLEVILLE, NJ 07109
Medicare Provider Number: 310009

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2911	8.7	8.5	0.5	14.9	13.2	0.9	18.6	16.7	0.8
CONDITIONS:										
Acute Myocardial Infarction	66	39.4	32.9	6.9	45.5	35.8	8.1	48.5	38.4	8.6
Congestive Heart Failure	172	12.2	13.6	2.9	24.4	21.5	4.4	28.5	27.3	3.9
Pneumonia/Influenza	100	13.0	17.3	4.4	26.0	23.5	4.6	29.0	27.3	4.5
Chronic Obstructive Pulmonary Disease	33	6.1	8.8	-----	18.2	15.3	-----	24.2	19.8	-----
Transient Cerebral Ischemia	84	2.4	2.0	1.6	3.6	4.4	3.9	10.7	7.0	3.9
Stroke	72	27.8	21.2	6.4	38.9	28.5	8.1	43.1	32.4	7.9
Hip Fracture	66	4.5	6.6	4.7	6.1	11.7	5.9	12.1	15.2	5.1
Sepsis	19	47.4	35.7	-----	52.6	46.1	-----	57.9	51.3	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	15	6.7	5.3	-----	6.7	9.9	-----	6.7	13.3	-----
Carotid Endarterectomy	9	11.1	0.9	-----	11.1	1.6	-----	11.1	2.4	-----
Hip Replacement/Reconstruction	35	11.4	4.9	-----	11.4	8.8	-----	11.4	11.9	-----
Open Reduction of Hip Fracture	36	0.0	5.6	-----	2.8	10.4	-----	11.1	13.8	-----
Prostatectomy	139	0.0	1.0	1.3	1.4	2.5	1.6	4.3	4.2	2.8
Cholecystectomy	43	4.7	3.3	-----	7.0	6.1	-----	9.3	8.1	-----
Hysterectomy	19	0.0	0.5	-----	5.3	1.3	-----	5.3	2.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



CLARA MAASS MEDICAL CENTER

Medicare Provider Number: 310009

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.2 years
Proportion female	57.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	47.1 %
Transferred from skilled nursing facility	0.1 %
Admitted for elective procedure	25.9 %
Admitted for emergency	61.3 %

COMORBIDITIES:

Cancer	9.2 %
Chronic cardiovascular disease	38.0 %
Chronic liver disease	1.0 %
Chronic renal disease	2.4 %
Chronic pulmonary disease	10.8 %
Cerebrovascular degeneration	2.9 %
Diabetes mellitus	9.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	78.1%
State	20.3%
Outside State	1.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	15.0 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	490
Occupancy Rate	85.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.1520

STAFFING:

Total Number of Physicians	207
Percent of Physicians Board Certified Specialists	61.8 %
Medical Residents/Interns	0
Registered Nurses	285
Licensed Practical Nurses	28

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	Yes

*** Not used in calculating mortality rates**

COLUMBUS HOSPITAL

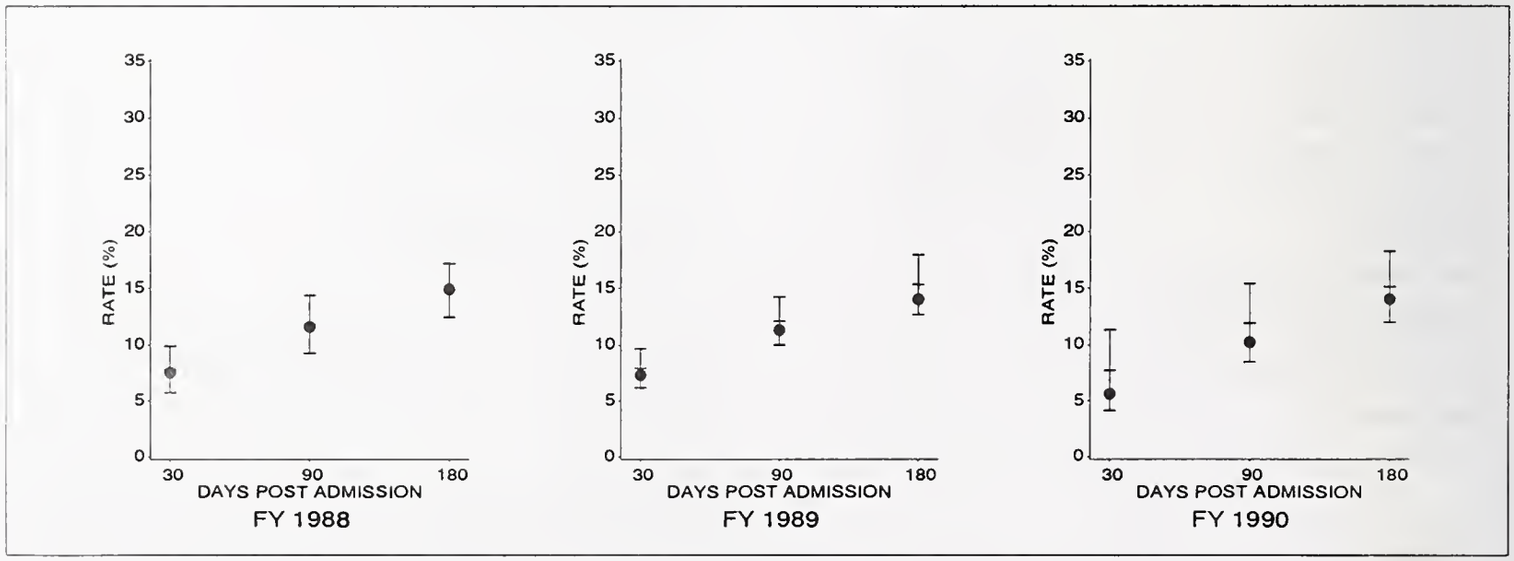
495 NORTH 13TH ST
NEWARK, NJ 07107
Medicare Provider Number: 310093

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1261	5.6	7.7	1.8	10.2	11.9	1.7	14.0	15.1	1.6
CONDITIONS:										
Acute Myocardial Infarction	18	27.8	29.4	-----	33.3	32.2	-----	44.4	34.7	-----
Congestive Heart Failure	93	7.5	14.6	6.7	11.8	23.2	9.4	24.7	29.5	9.1
Pneumonia/Influenza	49	10.2	14.4	-----	14.3	19.7	-----	14.3	23.3	-----
Chronic Obstructive Pulmonary Disease	35	0.0	8.1	-----	11.4	13.7	-----	11.4	18.1	-----
Transient Cerebral Ischemia	49	2.0	1.7	-----	6.1	3.8	-----	8.2	6.0	-----
Stroke	26	19.2	22.1	-----	30.8	29.4	-----	34.6	33.7	-----
Hip Fracture	15	0.0	6.1	-----	0.0	11.0	-----	6.7	14.3	-----
Sepsis	13	7.7	25.1	-----	23.1	32.4	-----	30.8	36.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	19	0.0	4.4	-----	0.0	8.1	-----	21.1	11.0	-----
Carotid Endarterectomy	2	0.0	0.9	-----	0.0	1.7	-----	0.0	2.5	-----
Hip Replacement/Reconstruction	11	0.0	3.2	-----	0.0	6.8	-----	0.0	9.7	-----
Open Reduction of Hip Fracture	9	0.0	6.2	-----	0.0	11.4	-----	11.1	14.9	-----
Prostatectomy	57	1.8	1.2	1.7	1.8	2.7	3.0	5.3	4.5	2.9
Cholecystectomy	17	0.0	1.6	-----	0.0	3.1	-----	0.0	4.5	-----
Hysterectomy	3	0.0	0.5	-----	0.0	1.2	-----	0.0	2.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



COLUMBUS HOSPITAL
Medicare Provider Number: 310093

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.4 years
Proportion female	56.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	55.7 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	20.1 %
Admitted for emergency	43.4 %

COMORBIDITIES:

Cancer	5.2 %
Chronic cardiovascular disease	37.8 %
Chronic liver disease	1.1 %
Chronic renal disease	4.0 %
Chronic pulmonary disease	11.8 %
Cerebrovascular degeneration	1.6 %
Diabetes mellitus	11.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	90.0%
State	8.3%
Outside State	1.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	12.5 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	206
Occupancy Rate	81.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	23.5 %
Case Mix Index (CMI)	1.0942

STAFFING:

Total Number of Physicians	205
Percent of Physicians Board Certified Specialists	59.0 %
Medical Residents/Interns	0
Registered Nurses	145
Licensed Practical Nurses	48

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

COMMUNITY MEMORIAL HOSPITAL

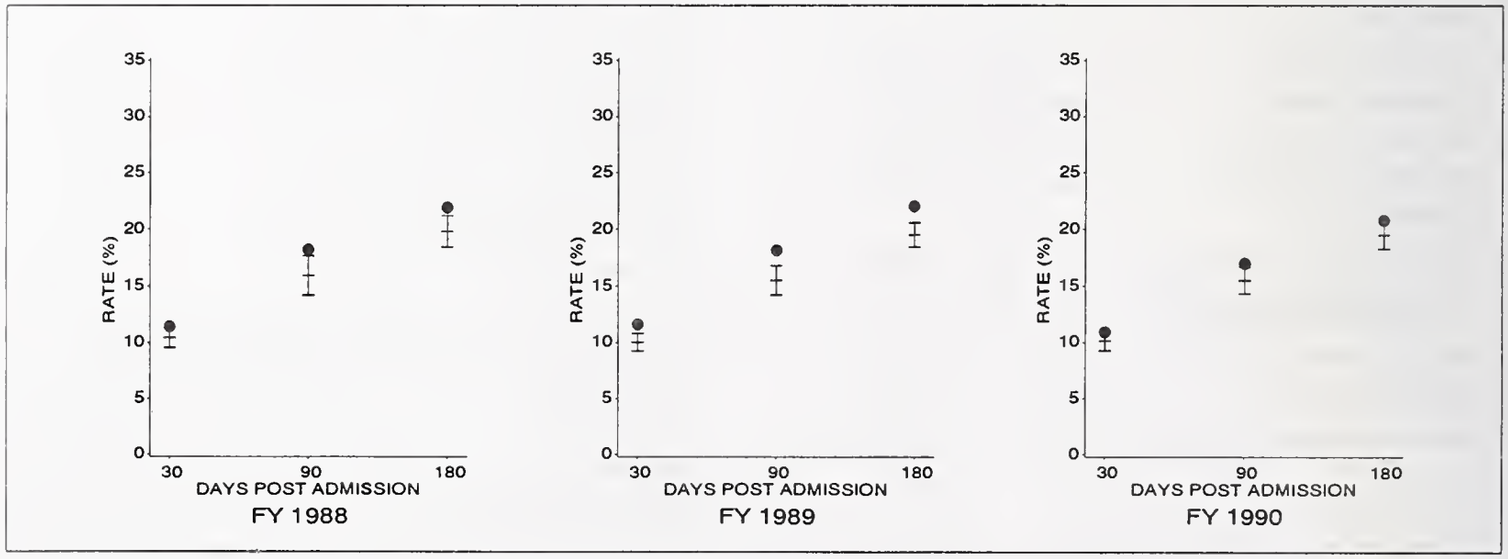
RT 37
TOMS RIVER, NJ 08753
Medicare Provider Number: 310041

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	6902	10.9	10.1	0.4	17.0	15.5	0.6	20.8	19.5	0.6
CONDITIONS:										
Acute Myocardial Infarction	246	34.1	26.1	4.4	39.0	29.5	4.8	40.2	32.4	4.5
Congestive Heart Failure	522	15.5	16.5	1.9	26.4	25.7	1.9	33.7	32.1	2.3
Pneumonia/Influenza	279	26.5	18.4	3.1	31.2	25.4	3.1	33.7	29.9	2.9
Chronic Obstructive Pulmonary Disease	122	4.9	8.2	3.4	15.6	14.4	3.5	19.7	19.2	3.7
Transient Cerebral Ischemia	180	2.2	2.3	1.2	6.1	4.8	2.1	8.3	7.6	3.4
Stroke	320	22.8	20.2	2.6	31.9	27.3	3.6	37.5	31.2	4.0
Hip Fracture	160	3.7	6.3	2.9	8.7	10.9	3.4	11.9	14.2	3.6
Sepsis	105	30.5	30.6	4.5	41.9	39.8	5.1	45.7	45.0	4.9
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	47	2.1	4.3	-----	10.6	7.6	-----	10.6	10.5	-----
Carotid Endarterectomy	63	0.0	2.1	2.9	6.3	3.8	3.3	7.9	5.5	4.3
Hip Replacement/Reconstruction	96	1.0	3.6	3.0	3.1	6.5	4.5	4.2	8.6	5.4
Open Reduction of Hip Fracture	87	4.6	5.7	2.8	10.3	10.3	3.8	12.6	13.6	5.2
Prostatectomy	331	0.6	1.1	0.8	2.7	2.6	1.1	5.4	4.4	1.6
Cholecystectomy	167	3.0	3.3	1.9	5.4	5.8	2.6	6.6	7.6	2.8
Hysterectomy	65	0.0	0.7	1.1	1.5	1.5	1.7	1.5	2.4	2.1

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



COMMUNITY MEMORIAL HOSPITAL
Medicare Provider Number: 310041

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	76.0 years
Proportion female	53.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	24.9 %
Transferred from skilled nursing facility	6.8 %
Admitted for elective procedure	13.3 %
Admitted for emergency	9.4 %

COMORBIDITIES:

Cancer	10.2 %
Chronic cardiovascular disease	41.3 %
Chronic liver disease	1.0 %
Chronic renal disease	3.8 %
Chronic pulmonary disease	20.0 %
Cerebrovascular degeneration	1.9 %
Diabetes mellitus	6.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	93.2%
State	5.0%
Outside State	1.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.7 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	473
Occupancy Rate	95.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	57.2 %
Case Mix Index (CMI)	1.2395

STAFFING:

Total Number of Physicians	299
Percent of Physicians Board Certified Specialists	56.2 %
Medical Residents/Interns	0
Registered Nurses	745
Licensed Practical Nurses	167

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

COOPER HOSPITAL/UNIVERSITY MED CENTER

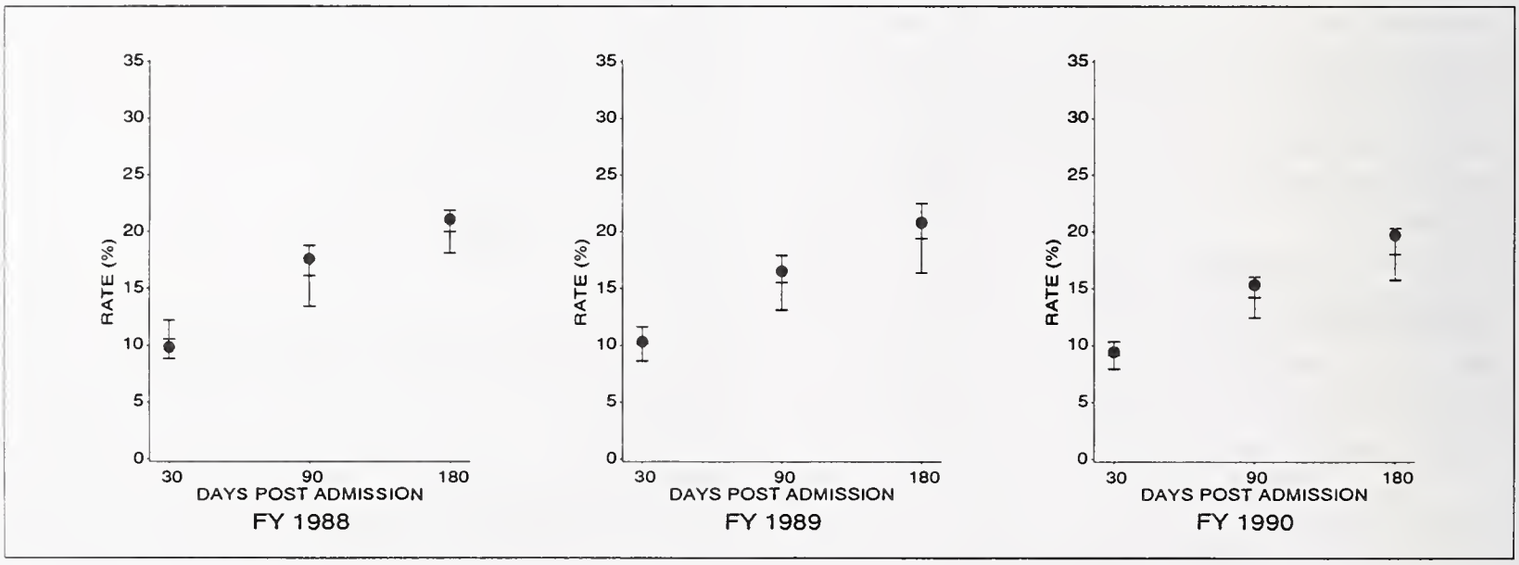
1 COOPER PLAZA
CAMDEN, NJ 08103
Medicare Provider Number: 310014

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2638	9.4	9.1	0.6	15.3	14.2	0.9	19.7	18.0	1.1
CONDITIONS:										
Acute Myocardial Infarction	95	20.0	22.7	5.9	22.1	26.0	4.7	25.3	28.6	4.8
Congestive Heart Failure	109	14.7	14.0	3.4	22.0	22.3	5.9	25.7	28.3	5.2
Pneumonia/Influenza	50	22.0	15.9	-----	34.0	21.6	-----	38.0	25.8	-----
Chronic Obstructive Pulmonary Disease	24	12.5	9.6	-----	16.7	16.8	-----	25.0	21.7	-----
Transient Cerebral Ischemia	48	0.0	2.0	-----	0.0	4.4	-----	6.3	7.1	-----
Stroke	72	18.1	21.5	5.7	22.2	27.7	7.7	25.0	31.3	7.7
Hip Fracture	35	5.7	7.3	-----	14.3	13.3	-----	20.0	17.3	-----
Sepsis	19	47.4	23.3	-----	52.6	30.1	-----	57.9	33.9	-----
PROCEDURES:										
Angioplasty	28	7.1	3.7	-----	7.1	4.8	-----	7.1	5.9	-----
Coronary Artery Bypass Graft	115	5.2	7.0	2.8	9.6	10.3	2.9	12.2	11.6	3.0
Initial Pacemaker Insertion	35	2.9	3.4	-----	2.9	6.1	-----	5.7	8.7	-----
Carotid Endarterectomy	11	0.0	1.7	-----	0.0	3.0	-----	0.0	4.4	-----
Hip Replacement/Reconstruction	20	0.0	3.0	-----	5.0	5.9	-----	5.0	8.2	-----
Open Reduction of Hip Fracture	20	5.0	7.4	-----	10.0	13.5	-----	20.0	17.7	-----
Prostatectomy	80	0.0	1.4	3.6	3.7	3.4	3.5	8.7	5.5	4.0
Cholecystectomy	28	10.7	3.7	-----	10.7	6.5	-----	10.7	8.4	-----
Hysterectomy	28	0.0	1.5	-----	3.6	3.3	-----	7.1	5.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



COOPER HOSPITAL/UNIVERSITY MED CENTER

Medicare Provider Number: 310014

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.4 years
Proportion female	52.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	42.2 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	27.2 %
Admitted for emergency	60.1 %

COMORBIDITIES:

Cancer	11.1 %
Chronic cardiovascular disease	43.4 %
Chronic liver disease	0.9 %
Chronic renal disease	3.2 %
Chronic pulmonary disease	10.7 %
Cerebrovascular degeneration	3.8 %
Diabetes mellitus	11.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	65.5%
State	30.3%
Outside State	4.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.8 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	499
Occupancy Rate	83.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	24.9 %
Case Mix Index (CMI)	1.5116

STAFFING:

Total Number of Physicians	455
Percent of Physicians Board Certified Specialists	69.7 %
Medical Residents/Interns	135
Registered Nurses	681
Licensed Practical Nurses	52

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	Yes
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

DEBORAH HEART & LUNG CENTER

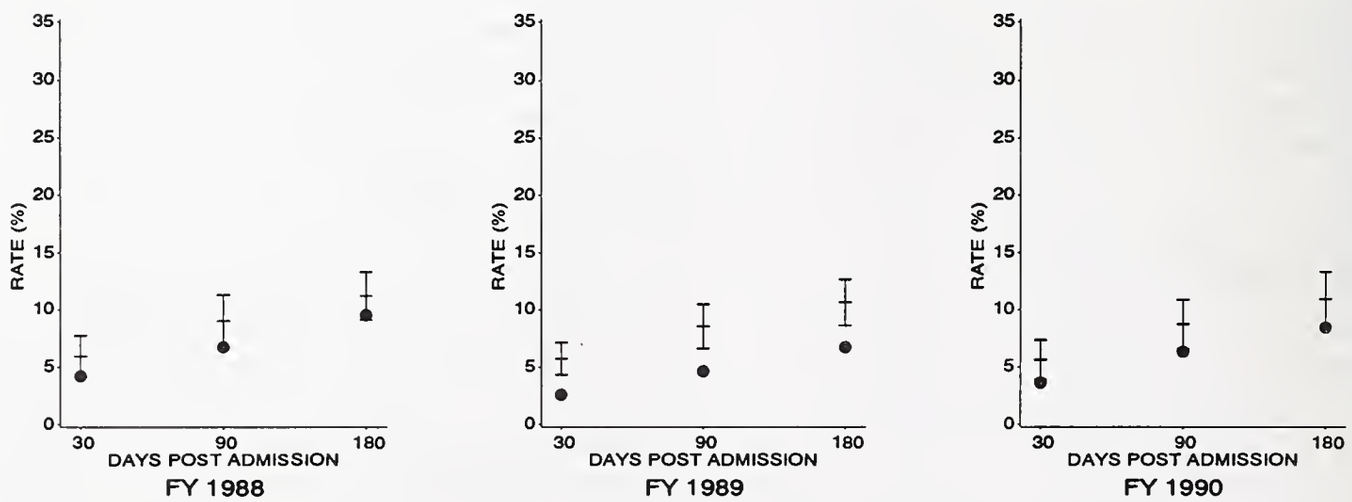
TRENTON RD
BROWNS MILLS, NJ 08015
Medicare Provider Number: 310031

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1278	3.6	5.6	0.9	6.3	8.7	1.1	8.4	10.9	1.2
CONDITIONS:										
Acute Myocardial Infarction	16	0.0	20.4	-----	0.0	23.8	-----	12.5	26.4	-----
Congestive Heart Failure	55	9.1	13.1	6.9	20.0	21.3	7.8	21.8	27.5	9.0
Pneumonia/Influenza	3	0.0	12.8	-----	0.0	18.5	-----	33.3	22.8	-----
Chronic Obstructive Pulmonary Disease	26	3.8	5.5	-----	7.7	9.4	-----	7.7	13.0	-----
Transient Cerebral Ischemia	5	20.0	1.9	-----	40.0	3.6	-----	40.0	5.4	-----
Stroke	2	50.0	34.0	-----	50.0	39.8	-----	50.0	43.3	-----
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	90	0.0	1.8	-----	0.0	2.6	-----	0.0	3.4	-----
Coronary Artery Bypass Graft	253	5.9	4.9	1.5	7.1	7.4	1.7	7.9	8.6	1.8
Initial Pacemaker Insertion	22	4.5	2.5	-----	9.1	5.4	-----	9.1	7.9	-----
Carotid Endarterectomy	10	10.0	1.7	-----	10.0	2.9	-----	10.0	4.2	-----
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



DEBORAH HEART & LUNG CENTER
Medicare Provider Number: 310031

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	70.2 years
Proportion female	41.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	68.0 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	67.4 %
Admitted for emergency	1.3 %

COMORBIDITIES:

Cancer	2.3 %
Chronic cardiovascular disease	73.4 %
Chronic liver disease	0.2 %
Chronic renal disease	0.7 %
Chronic pulmonary disease	13.5 %
Cerebrovascular degeneration	0.6 %
Diabetes mellitus	6.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	6.6%
State	80.4%
Outside State	13.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.3 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	171
Occupancy Rate	72.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	39.0 %
Case Mix Index (CMI)	2.5229

STAFFING:

Total Number of Physicians	55
Percent of Physicians Board Certified Specialists	72.7 %
Medical Residents/Interns	35
Registered Nurses	246
Licensed Practical Nurses	5

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

DOVER GENERAL HOSPITAL

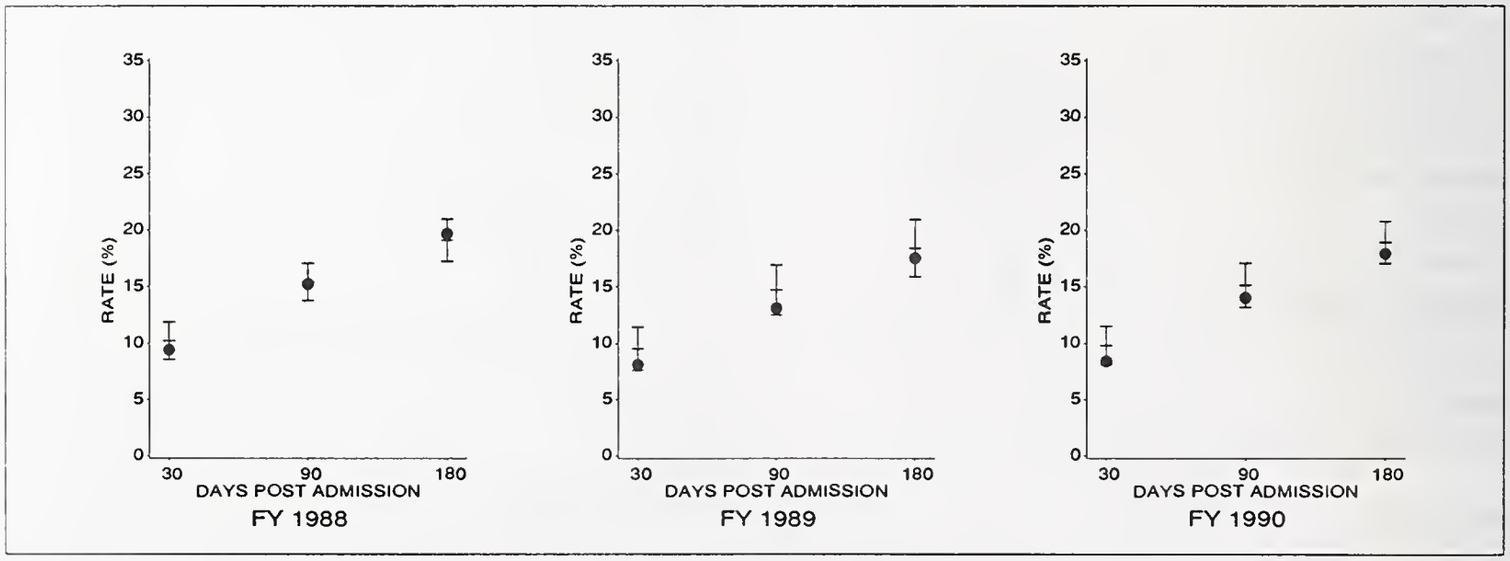
JARDINE ST
DOVER, NJ 07801
Medicare Provider Number: 310067

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2086	8.4	9.8	0.9	14.0	15.1	1.0	17.9	18.9	0.9
CONDITIONS:										
Acute Myocardial Infarction	89	21.3	25.0	5.3	28.1	28.1	4.9	30.3	30.7	4.9
Congestive Heart Failure	105	8.6	14.7	5.0	17.1	23.0	5.0	26.7	29.2	5.1
Pneumonia/Influenza	111	16.2	16.4	3.5	19.8	22.2	4.5	22.5	26.0	5.6
Chronic Obstructive Pulmonary Disease	29	3.4	8.0	-----	6.9	13.9	-----	6.9	18.0	-----
Transient Cerebral Ischemia	49	2.0	1.7	-----	2.0	3.9	-----	2.0	6.4	-----
Stroke	84	17.9	20.5	5.0	25.0	27.1	5.1	27.4	30.8	5.8
Hip Fracture	56	3.6	7.2	5.0	5.4	12.9	6.6	5.4	16.9	7.6
Sepsis	12	25.0	26.2	-----	25.0	35.7	-----	25.0	40.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	16	0.0	2.0	-----	0.0	4.1	-----	0.0	6.1	-----
Carotid Endarterectomy	2	0.0	3.2	-----	0.0	5.5	-----	0.0	7.0	-----
Hip Replacement/Reconstruction	29	0.0	6.4	-----	3.4	12.5	-----	3.4	17.1	-----
Open Reduction of Hip Fracture	23	4.3	7.1	-----	4.3	12.8	-----	4.3	16.9	-----
Prostatectomy	71	0.0	1.2	2.8	7.0	2.9	4.2	9.9	5.0	5.2
Cholecystectomy	33	3.0	1.9	-----	3.0	3.1	-----	6.1	3.9	-----
Hysterectomy	18	0.0	1.1	-----	5.6	2.5	-----	5.6	3.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



DOVER GENERAL HOSPITAL
Medicare Provider Number: 310067

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.2 years
Proportion female	58.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	40.9 %
Transferred from skilled nursing facility	3.2 %
Admitted for elective procedure	18.2 %
Admitted for emergency	53.8 %

COMORBIDITIES:

Cancer	10.5 %
Chronic cardiovascular disease	38.0 %
Chronic liver disease	1.4 %
Chronic renal disease	2.6 %
Chronic pulmonary disease	13.8 %
Cerebrovascular degeneration	2.4 %
Diabetes mellitus	6.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	75.1%
State	20.2%
Outside State	4.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.5 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	360
Occupancy Rate	56.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	28.0 %
Case Mix Index (CMI)	1.1833

STAFFING:

Total Number of Physicians	221
Percent of Physicians Board Certified Specialists	72.9 %
Medical Residents/Interns	0
Registered Nurses	237
Licensed Practical Nurses	66

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

EAST ORANGE GENERAL HOSPITAL

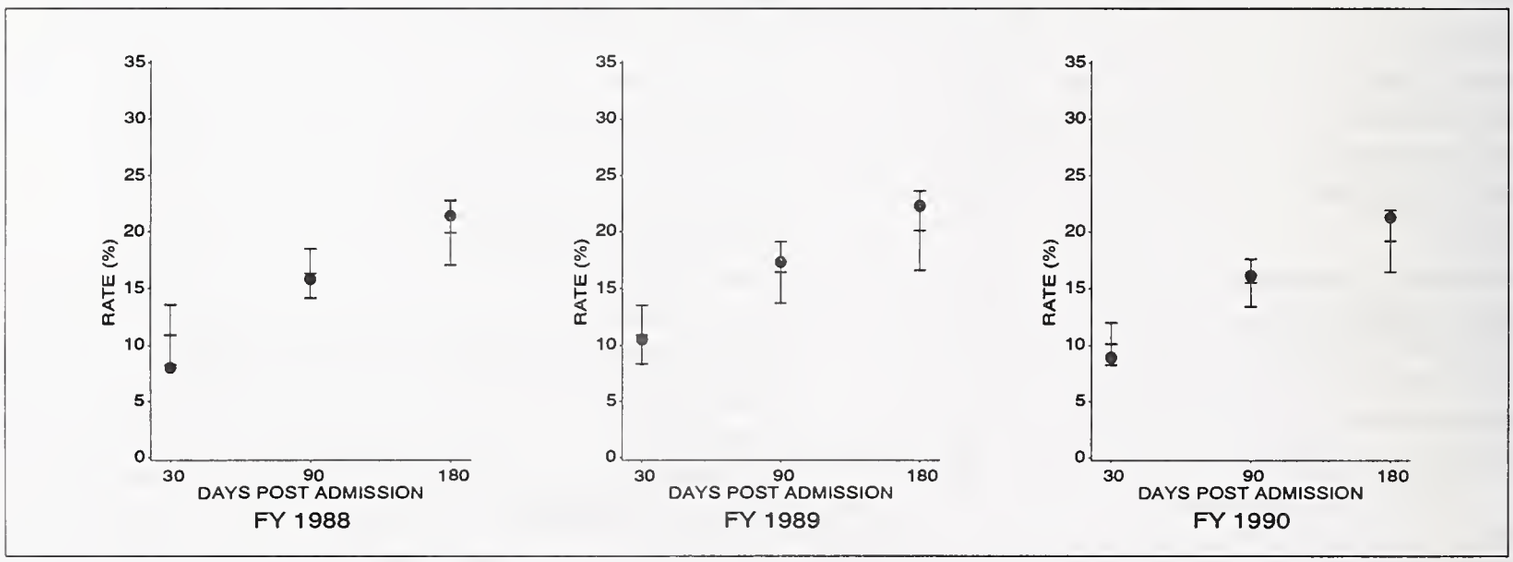
300 CENTRAL AVE
EAST ORANGE, NJ 07018
Medicare Provider Number: 310083

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1226	8.9	10.1	0.9	16.1	15.5	1.1	21.3	19.2	1.4
CONDITIONS:										
Acute Myocardial Infarction	10	60.0	29.0	-----	70.0	33.4	-----	70.0	37.1	-----
Congestive Heart Failure	76	14.5	14.8	4.9	25.0	23.5	5.1	30.3	29.9	5.5
Pneumonia/Influenza	58	17.2	19.2	6.7	24.1	25.8	8.5	32.8	30.1	9.7
Chronic Obstructive Pulmonary Disease	13	0.0	7.5	-----	7.7	13.6	-----	7.7	18.4	-----
Transient Cerebral Ischemia	33	3.0	2.0	-----	9.1	4.3	-----	9.1	6.8	-----
Stroke	60	21.7	22.6	5.9	26.7	30.9	6.6	31.7	35.3	8.2
Hip Fracture	12	16.7	8.0	-----	16.7	14.6	-----	33.3	19.1	-----
Sepsis	26	15.4	36.0	-----	50.0	45.1	-----	61.5	49.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	8	12.5	4.1	-----	25.0	8.1	-----	25.0	11.6	-----
Carotid Endarterectomy	1	0.0	0.9	-----	0.0	1.8	-----	0.0	2.5	-----
Hip Replacement/Reconstruction	8	12.5	6.9	-----	12.5	12.7	-----	25.0	16.8	-----
Open Reduction of Hip Fracture	4	25.0	7.3	-----	25.0	14.5	-----	50.0	19.6	-----
Prostatectomy	33	0.0	2.2	-----	3.0	5.2	-----	6.1	8.6	-----
Cholecystectomy	4	0.0	3.1	-----	0.0	4.9	-----	0.0	5.9	-----
Hysterectomy	2	0.0	0.4	-----	0.0	1.0	-----	0.0	1.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



EAST ORANGE GENERAL HOSPITAL

Medicare Provider Number: 310083

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	68.1 years
Proportion female	55.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	0.2 %
Transferred from skilled nursing facility	9.2 %
Admitted for elective procedure	10.8 %
Admitted for emergency	70.8 %

COMORBIDITIES:

Cancer	5.5 %
Chronic cardiovascular disease	29.6 %
Chronic liver disease	1.5 %
Chronic renal disease	12.6 %
Chronic pulmonary disease	10.6 %
Cerebrovascular degeneration	6.2 %
Diabetes mellitus	14.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	90.8%
State	6.9%
Outside State	2.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	17.0 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	238
Occupancy Rate	91.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	31.0 %
Case Mix Index (CMI)	1.2987

STAFFING:

Total Number of Physicians	215
Percent of Physicians Board Certified Specialists	44.2 %
Medical Residents/Interns	4
Registered Nurses	163
Licensed Practical Nurses	19

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

ELIZABETH GENERAL MEDICAL CENTER

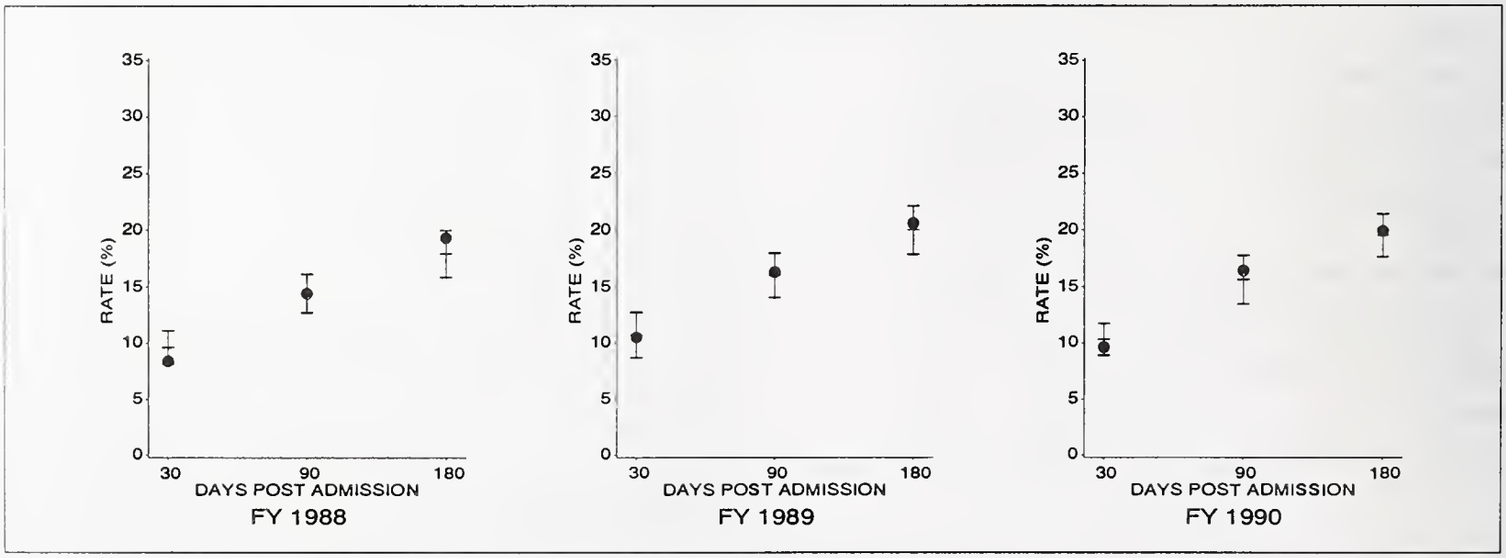
925 E JERSEY ST
ELIZABETH, NJ 07201
Medicare Provider Number: 310027

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1924	9.6	10.3	0.7	16.4	15.6	1.1	19.9	19.5	1.0
CONDITIONS:										
Acute Myocardial Infarction	60	23.3	28.2	6.9	28.3	31.0	6.9	28.3	33.5	7.8
Congestive Heart Failure	140	11.4	13.6	4.2	19.3	21.4	4.0	27.9	27.4	3.8
Pneumonia/Influenza	66	9.1	17.3	5.7	19.7	23.5	5.8	22.7	27.5	5.8
Chronic Obstructive Pulmonary Disease	33	0.0	8.2	-----	21.2	13.9	-----	21.2	18.2	-----
Transient Cerebral Ischemia	33	0.0	1.9	-----	3.0	4.2	-----	3.0	6.8	-----
Stroke	85	18.8	21.1	4.8	30.6	27.6	5.6	31.8	31.2	5.1
Hip Fracture	39	12.8	6.9	-----	17.9	12.0	-----	25.6	15.2	-----
Sepsis	44	34.1	31.1	-----	50.0	39.4	-----	50.0	44.0	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	26	0.0	3.0	-----	0.0	5.8	-----	3.8	8.5	-----
Carotid Endarterectomy	5	0.0	0.9	-----	0.0	1.7	-----	0.0	2.6	-----
Hip Replacement/Reconstruction	28	3.6	3.4	-----	3.6	6.5	-----	14.3	9.0	-----
Open Reduction of Hip Fracture	21	9.5	6.5	-----	14.3	11.6	-----	23.8	15.1	-----
Prostatectomy	19	0.0	1.0	-----	0.0	2.3	-----	5.3	4.0	-----
Cholecystectomy	28	3.6	3.5	-----	3.6	6.2	-----	3.6	7.9	-----
Hysterectomy	12	0.0	0.5	-----	0.0	1.2	-----	0.0	2.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ELIZABETH GENERAL MEDICAL CENTER

Medicare Provider Number: 310027

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.1 years
Proportion female	57.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	35.1 %
Transferred from skilled nursing facility	0.9 %
Admitted for elective procedure	15.0 %
Admitted for emergency	82.4 %

COMORBIDITIES:

Cancer	9.4 %
Chronic cardiovascular disease	36.1 %
Chronic liver disease	1.0 %
Chronic renal disease	5.2 %
Chronic pulmonary disease	12.1 %
Cerebrovascular degeneration	3.8 %
Diabetes mellitus	8.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	85.7%
State	11.8%
Outside State	2.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	13.7 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	451
Occupancy Rate	85.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	24.0 %
Case Mix Index (CMI)	1.2239

STAFFING:

Total Number of Physicians	405
Percent of Physicians Board Certified Specialists	53.1 %
Medical Residents/Interns	0
Registered Nurses	288
Licensed Practical Nurses	40

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

ELIZABETH GENERAL MEDICAL CENTER EAST

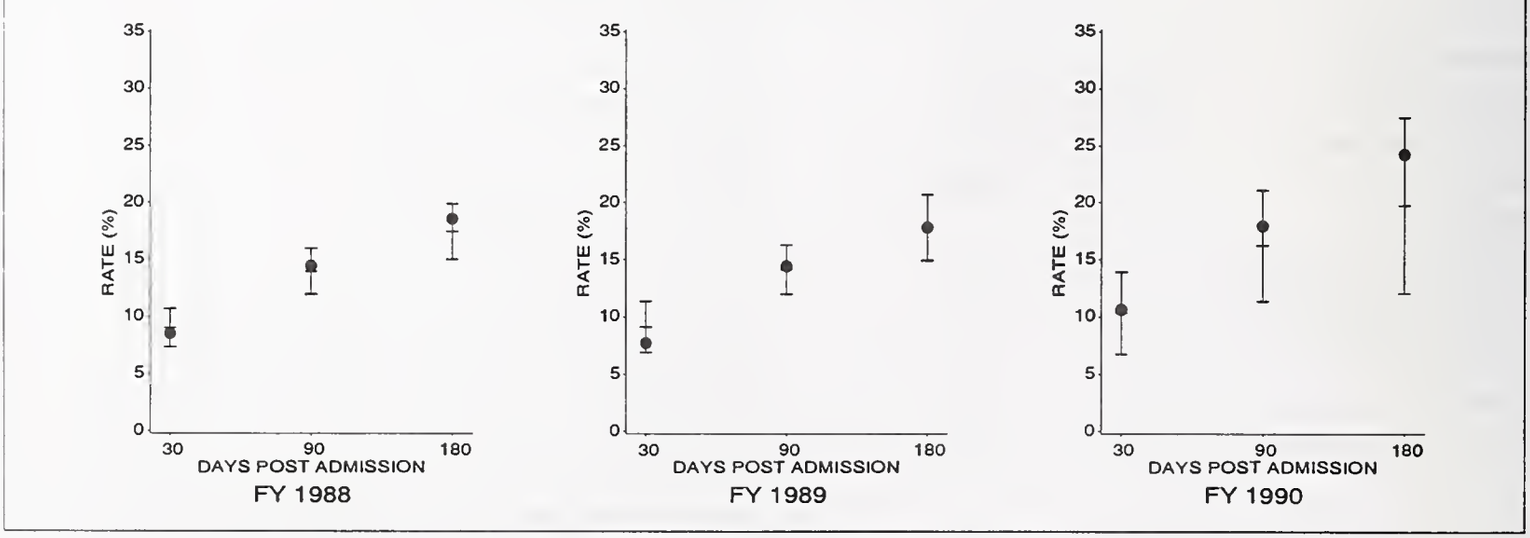
655 EAST JERSEY ST
ELIZABETH, NJ 07206
Medicare Provider Number: 310033

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	302	10.6	10.3	1.8	17.9	16.2	2.4	24.2	19.7	3.9
CONDITIONS:										
Acute Myocardial Infarction	6	33.3	24.8	-----	33.3	29.4	-----	50.0	31.9	-----
Congestive Heart Failure	21	9.5	16.7	-----	14.3	27.0	-----	19.0	32.4	-----
Pneumonia/Influenza	11	0.0	21.8	-----	18.2	29.8	-----	27.3	33.5	-----
Chronic Obstructive Pulmonary Disease	6	33.3	8.8	-----	33.3	15.0	-----	33.3	18.7	-----
Transient Cerebral Ischemia	4	0.0	1.9	-----	0.0	3.8	-----	0.0	5.4	-----
Stroke	7	57.1	33.2	-----	57.1	40.9	-----	71.4	44.2	-----
Hip Fracture	9	0.0	7.4	-----	0.0	12.8	-----	0.0	15.5	-----
Sepsis	1	0.0	43.3	-----	100.0	63.8	-----	100.0	70.3	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	3	0.0	1.4	-----	0.0	3.2	-----	0.0	5.0	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	6	0.0	6.1	-----	0.0	10.9	-----	0.0	13.3	-----
Open Reduction of Hip Fracture	5	0.0	5.1	-----	0.0	9.0	-----	0.0	11.2	-----
Prostatectomy	5	0.0	3.5	-----	0.0	8.5	-----	0.0	13.9	-----
Cholecystectomy	1	0.0	0.6	-----	0.0	1.1	-----	0.0	1.5	-----
Hysterectomy	2	0.0	0.3	-----	0.0	0.8	-----	0.0	1.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ELIZABETH GENERAL MEDICAL CENTER EAST

Medicare Provider Number: 310033

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.8 years
Proportion female	55.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	42.1 %
Transferred from skilled nursing facility	1.0 %
Admitted for elective procedure	15.9 %
Admitted for emergency	62.3 %

COMORBIDITIES:

Cancer	4.3 %
Chronic cardiovascular disease	37.1 %
Chronic liver disease	2.6 %
Chronic renal disease	11.9 %
Chronic pulmonary disease	14.2 %
Cerebrovascular degeneration	1.7 %
Diabetes mellitus	8.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	85.9%
State	10.4%
Outside State	3.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	12.6 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1987

PROFILE:

Total Beds	280
Ownership/Control	Church
Case Mix Index (CMI)	1.1571

STAFFING:

Medical Residents/Interns	5
Registered Nurses	154
Licensed Practical Nurses	24

SPECIALTY SERVICES:

Burn Unit	Yes
Coronary Care Unit	Yes
Hospice Care	Yes
Intensive Care Unit	Yes
Organ Transplant	Yes
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

ELMER COMMUNITY HOSPITAL

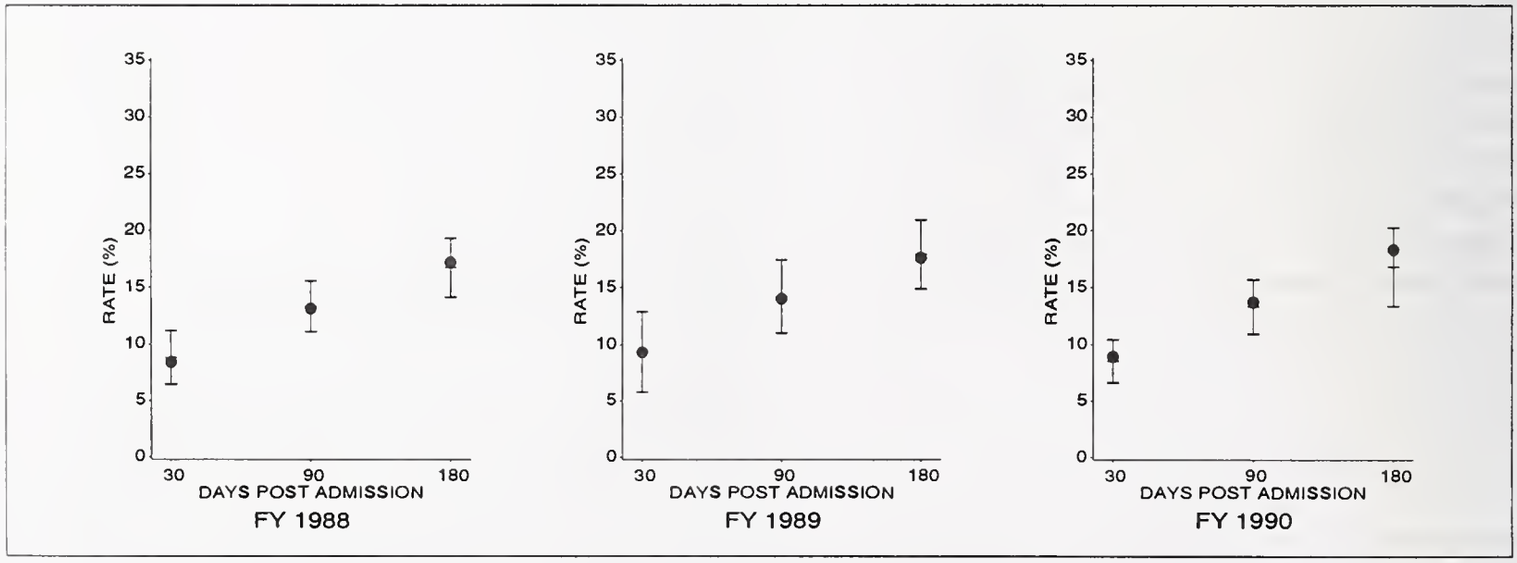
W FRONT ST
ELMER, NJ 08318
Medicare Provider Number: 310069

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	946	8.9	8.5	1.0	13.7	13.3	1.2	18.3	16.8	1.7
CONDITIONS:										
Acute Myocardial Infarction	14	28.6	17.9	-----	28.6	21.0	-----	35.7	23.5	-----
Congestive Heart Failure	60	13.3	14.6	4.7	21.7	22.9	6.2	30.0	29.1	7.4
Pneumonia/Influenza	41	9.8	15.1	-----	14.6	20.7	-----	17.1	24.3	-----
Chronic Obstructive Pulmonary Disease	24	0.0	7.7	-----	8.3	13.9	-----	16.7	18.5	-----
Transient Cerebral Ischemia	20	0.0	1.7	-----	5.0	4.0	-----	5.0	6.7	-----
Stroke	31	29.0	21.9	-----	35.5	27.9	-----	38.7	31.2	-----
Hip Fracture	21	0.0	7.2	-----	0.0	12.9	-----	0.0	16.6	-----
Sepsis	4	25.0	30.4	-----	25.0	37.3	-----	25.0	42.4	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	18	0.0	2.4	-----	11.1	5.3	-----	16.7	8.0	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	5	0.0	6.8	-----	0.0	12.5	-----	0.0	16.0	-----
Open Reduction of Hip Fracture	16	0.0	6.7	-----	0.0	12.2	-----	0.0	16.0	-----
Prostatectomy	25	0.0	1.0	-----	0.0	2.3	-----	0.0	3.8	-----
Cholecystectomy	13	7.7	2.9	-----	7.7	4.4	-----	7.7	5.1	-----
Hysterectomy	10	0.0	0.9	-----	0.0	1.9	-----	0.0	3.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ELMER COMMUNITY HOSPITAL

Medicare Provider Number: 310069

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	76.0 years
Proportion female	57.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	37.2 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	18.2 %
Admitted for emergency	61.8 %

COMORBIDITIES:

Cancer	6.3 %
Chronic cardiovascular disease	34.8 %
Chronic liver disease	1.3 %
Chronic renal disease	2.2 %
Chronic pulmonary disease	14.7 %
Cerebrovascular degeneration	5.2 %
Diabetes mellitus	6.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	24.0%
State	73.2%
Outside State	2.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.7 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	91
Occupancy Rate	68.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	55.6 %
Case Mix Index (CMI)	1.1050

STAFFING:

Total Number of Physicians	103
Percent of Physicians Board Certified Specialists	70.9 %
Medical Residents/Interns	0
Registered Nurses	66
Licensed Practical Nurses	38

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

ENGLEWOOD HOSPITAL ASSOCIATION

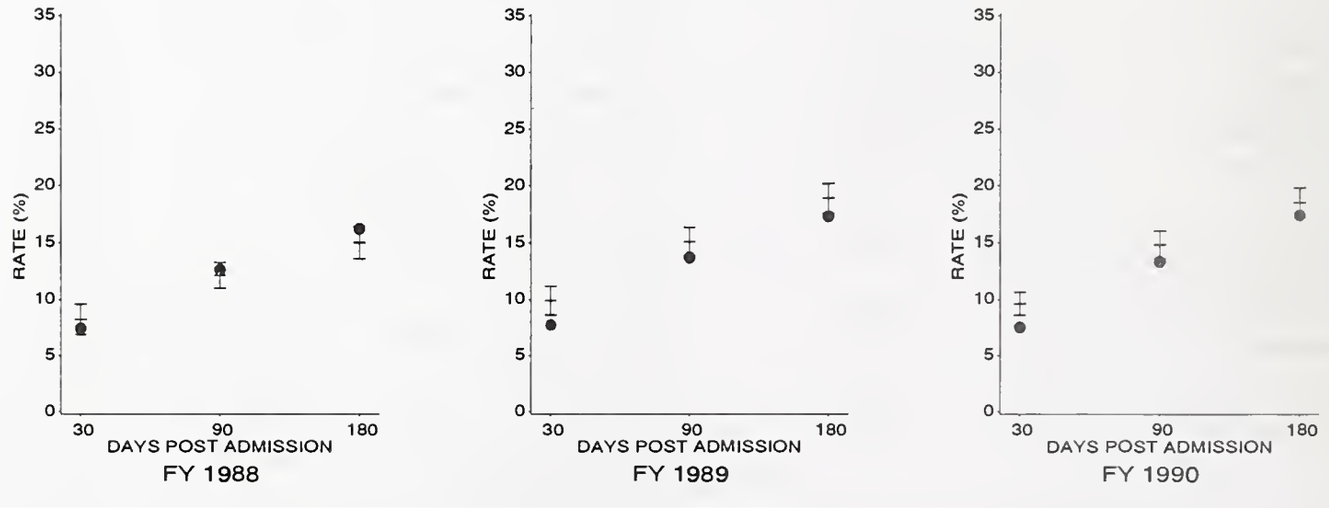
350 ENGLE ST
ENGLEWOOD, NJ 07631
Medicare Provider Number: 310045

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	4015	7.5	9.6	0.5	13.3	14.8	0.6	17.4	18.5	0.7
CONDITIONS:										
Acute Myocardial Infarction	128	26.6	32.2	4.8	32.8	35.5	4.4	36.7	38.5	4.5
Congestive Heart Failure	243	12.8	15.0	3.2	20.2	23.5	4.8	25.1	29.8	5.4
Pneumonia/Influenza	125	16.8	16.9	3.4	22.4	22.9	3.9	24.0	26.7	4.6
Chronic Obstructive Pulmonary Disease	79	11.4	10.5	4.3	25.3	17.7	7.4	25.3	22.4	9.6
Transient Cerebral Ischemia	87	1.1	1.6	1.8	4.6	3.7	2.8	9.2	6.0	3.8
Stroke	176	17.0	21.9	4.4	24.4	27.7	4.2	30.7	31.2	4.3
Hip Fracture	108	3.7	6.2	4.6	6.5	10.9	6.1	10.2	14.2	6.2
Sepsis	11	18.2	39.0	-----	27.3	48.6	-----	27.3	54.2	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	24	0.0	3.6	-----	4.2	7.4	-----	4.2	10.8	-----
Carotid Endarterectomy	11	0.0	1.5	-----	0.0	2.6	-----	0.0	3.8	-----
Hip Replacement/Reconstruction	48	2.1	4.0	-----	4.2	7.4	-----	6.3	9.9	-----
Open Reduction of Hip Fracture	55	5.5	5.7	3.5	9.1	10.4	5.2	12.7	13.7	5.1
Prostatectomy	134	0.0	1.4	1.7	0.0	3.1	3.2	3.7	5.2	2.3
Cholecystectomy	54	0.0	4.0	5.0	1.9	7.4	7.1	9.3	10.2	4.6
Hysterectomy	27	0.0	0.7	-----	0.0	1.7	-----	3.7	2.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ENGLEWOOD HOSPITAL ASSOCIATION

Medicare Provider Number: 310045

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.3 years
Proportion female	56.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	37.0 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	21.4 %
Admitted for emergency	60.3 %

COMORBIDITIES:

Cancer	10.5 %
Chronic cardiovascular disease	36.5 %
Chronic liver disease	0.8 %
Chronic renal disease	2.6 %
Chronic pulmonary disease	9.0 %
Cerebrovascular degeneration	3.7 %
Diabetes mellitus	7.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	82.9%
State	9.9%
Outside State	7.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	13.2 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	547
Occupancy Rate	74.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	34.0 %
Case Mix Index (CMI)	1.2296

STAFFING:

Total Number of Physicians	483
Percent of Physicians Board Certified Specialists	80.5 %
Medical Residents/Interns	43
Registered Nurses	454
Licensed Practical Nurses	43

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

GENERAL HOSPITAL CENTER AT PASSAIC

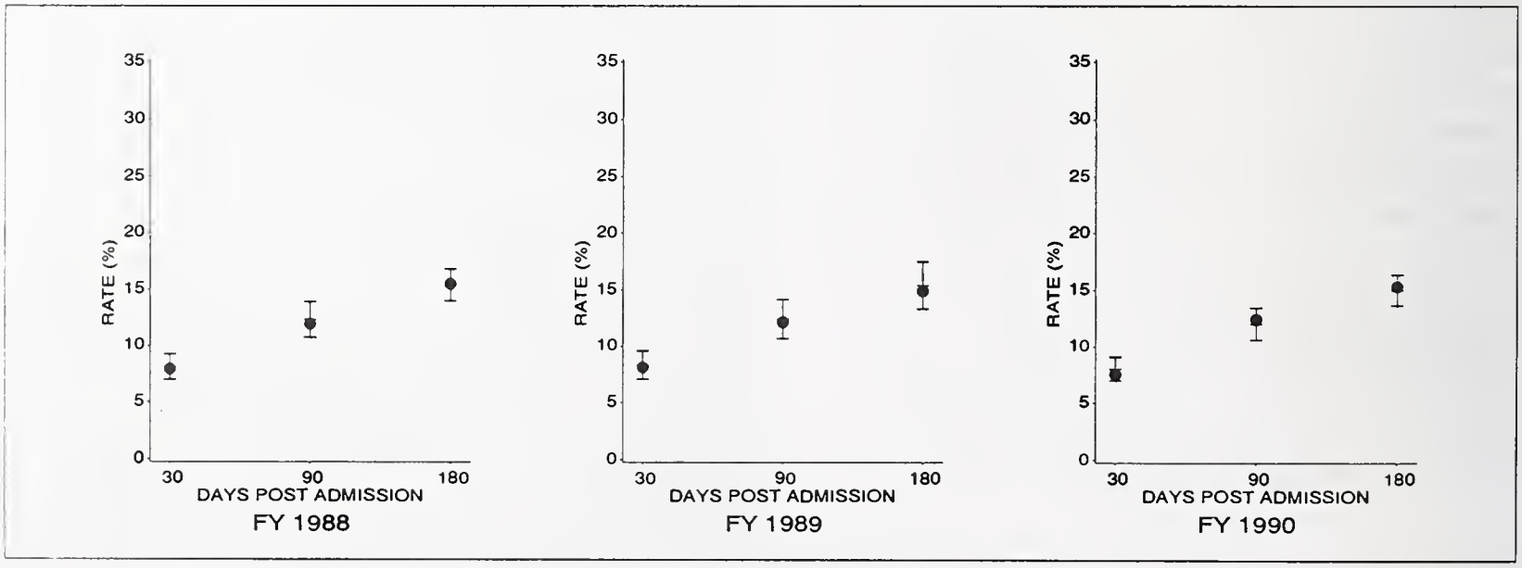
350 BOULEVARD
PASSAIC, NJ 07055
Medicare Provider Number: 310077

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2853	7.5	8.0	0.5	12.4	12.0	0.7	15.3	15.0	0.7
CONDITIONS:										
Acute Myocardial Infarction	79	25.3	25.5	5.0	29.1	28.2	5.2	34.2	30.8	6.2
Congestive Heart Failure	157	14.0	13.9	3.0	21.7	21.8	3.6	26.8	27.7	3.7
Pneumonia/Influenza	67	13.4	17.9	6.5	20.9	24.3	6.3	25.4	28.6	6.6
Chronic Obstructive Pulmonary Disease	29	3.4	7.2	-----	10.3	12.3	-----	20.7	16.3	-----
Transient Cerebral Ischemia	54	1.9	2.0	3.1	11.1	4.3	6.4	11.1	6.7	7.1
Stroke	82	17.1	19.4	4.6	29.3	25.3	5.3	32.9	28.9	5.4
Hip Fracture	49	10.2	6.3	-----	10.2	10.7	-----	12.2	13.8	-----
Sepsis	12	25.0	31.4	-----	50.0	40.6	-----	58.3	45.0	-----
PROCEDURES:										
Angioplasty	106	4.7	2.2	2.6	6.6	3.3	2.9	6.6	4.4	2.7
Coronary Artery Bypass Graft	126	10.3	6.1	4.5	11.9	9.0	4.2	13.5	10.3	4.4
Initial Pacemaker Insertion	35	0.0	2.0	-----	0.0	4.1	-----	5.7	6.2	-----
Carotid Endarterectomy	16	6.3	1.2	-----	6.3	2.1	-----	6.3	3.0	-----
Hip Replacement/Reconstruction	45	4.4	3.1	-----	6.7	5.6	-----	8.9	7.5	-----
Open Reduction of Hip Fracture	25	8.0	6.0	-----	8.0	10.4	-----	8.0	13.6	-----
Prostatectomy	142	0.7	1.0	2.1	4.2	2.4	2.2	6.3	4.1	2.7
Cholecystectomy	64	0.0	2.4	3.7	6.3	4.1	2.9	10.9	5.4	4.4
Hysterectomy	29	0.0	1.5	-----	3.4	3.4	-----	3.4	5.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



GENERAL HOSPITAL CENTER AT PASSAIC

Medicare Provider Number: 310077

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.4 years
Proportion female	53.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	43.8 %
Transferred from skilled nursing facility	1.4 %
Admitted for elective procedure	29.7 %
Admitted for emergency	66.4 %

COMORBIDITIES:

Cancer	6.2 %
Chronic cardiovascular disease	47.2 %
Chronic liver disease	0.9 %
Chronic renal disease	1.4 %
Chronic pulmonary disease	10.2 %
Cerebrovascular degeneration	1.5 %
Diabetes mellitus	7.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	53.5%
State	44.1%
Outside State	2.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.5 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	303
Occupancy Rate	82.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	36.3 %
Case Mix Index (CMI)	1.5630

STAFFING:

Total Number of Physicians	262
Percent of Physicians Board Certified Specialists	73.7 %
Medical Residents/Interns	0
Registered Nurses	323
Licensed Practical Nurses	44

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

GREENVILLE HOSPITAL

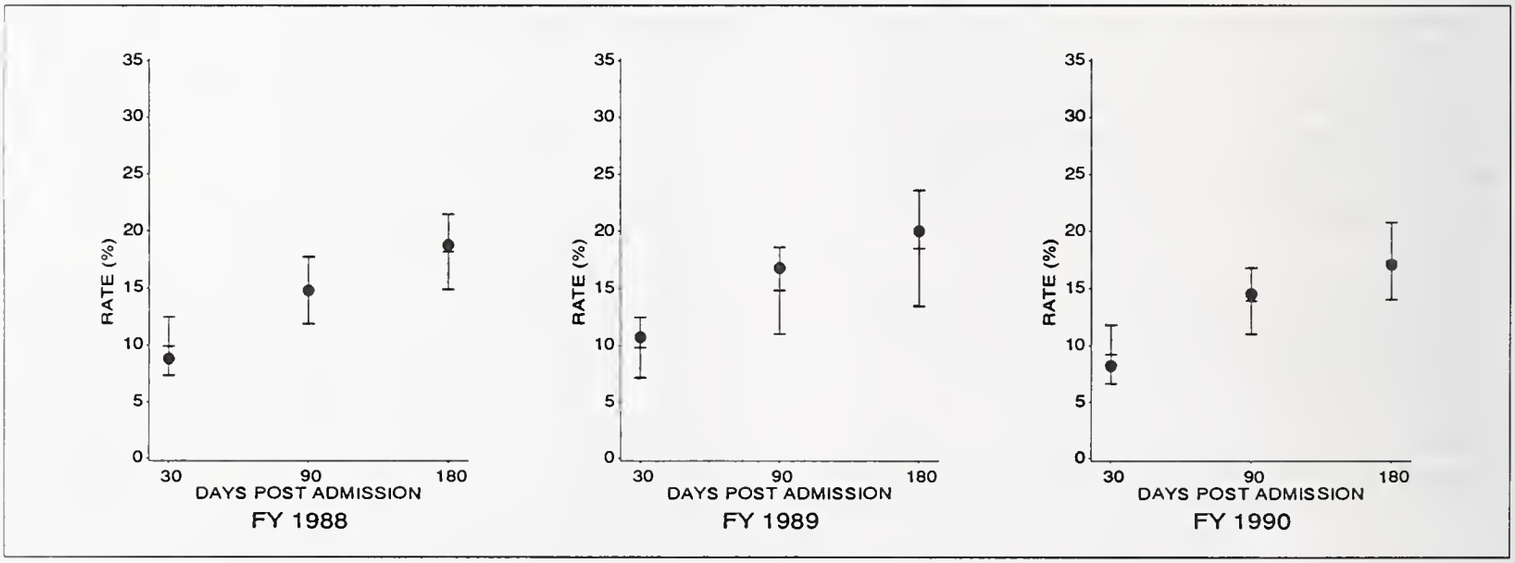
1825 KENNEDY BLVD
JERSEY CITY, NJ 07305
Medicare Provider Number: 310105

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	601	8.2	9.2	1.3	14.5	13.9	1.5	17.1	17.4	1.7
CONDITIONS:										
Acute Myocardial Infarction	15	6.7	30.1	-----	20.0	33.6	-----	20.0	36.4	-----
Congestive Heart Failure	40	17.5	15.8	-----	37.5	25.0	-----	47.5	31.3	-----
Pneumonia/Influenza	24	16.7	14.5	-----	25.0	19.2	-----	25.0	22.3	-----
Chronic Obstructive Pulmonary Disease	19	5.3	8.5	-----	5.3	13.9	-----	10.5	18.5	-----
Transient Cerebral Ischemia	33	3.0	1.6	-----	6.1	3.6	-----	6.1	6.0	-----
Stroke	26	15.4	15.8	-----	26.9	22.0	-----	34.6	25.6	-----
Hip Fracture	6	0.0	10.5	-----	0.0	18.5	-----	0.0	23.6	-----
Sepsis	2	0.0	15.0	-----	0.0	20.7	-----	0.0	24.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	6	0.0	4.7	-----	33.3	9.2	-----	33.3	12.7	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	5	0.0	7.3	-----	0.0	13.4	-----	0.0	17.2	-----
Open Reduction of Hip Fracture	2	0.0	11.0	-----	0.0	19.6	-----	0.0	25.6	-----
Prostatectomy	8	0.0	1.2	-----	12.5	3.0	-----	12.5	4.8	-----
Cholecystectomy	9	11.1	2.0	-----	11.1	3.6	-----	11.1	4.7	-----
Hysterectomy	2	0.0	0.7	-----	0.0	2.1	-----	0.0	3.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



GREENVILLE HOSPITAL
Medicare Provider Number: 310105

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.5 years
Proportion female	59.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	16.5 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	16.1 %
Admitted for emergency	71.7 %

COMORBIDITIES:

Cancer	7.3 %
Chronic cardiovascular disease	30.9 %
Chronic liver disease	1.7 %
Chronic renal disease	3.7 %
Chronic pulmonary disease	13.3 %
Cerebrovascular degeneration	2.2 %
Diabetes mellitus	12.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	95.8%
State	2.1%
Outside State	2.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	12.4 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	86
Occupancy Rate	75.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	38.0 %
Case Mix Index (CMI)	1.0958

STAFFING:

Total Number of Physicians	190
Percent of Physicians Board Certified Specialists	35.8 %
Medical Residents/Interns	0
Registered Nurses	60
Licensed Practical Nurses	18

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

* Not used in calculating mortality rates

HACKENSACK MEDICAL CENTER

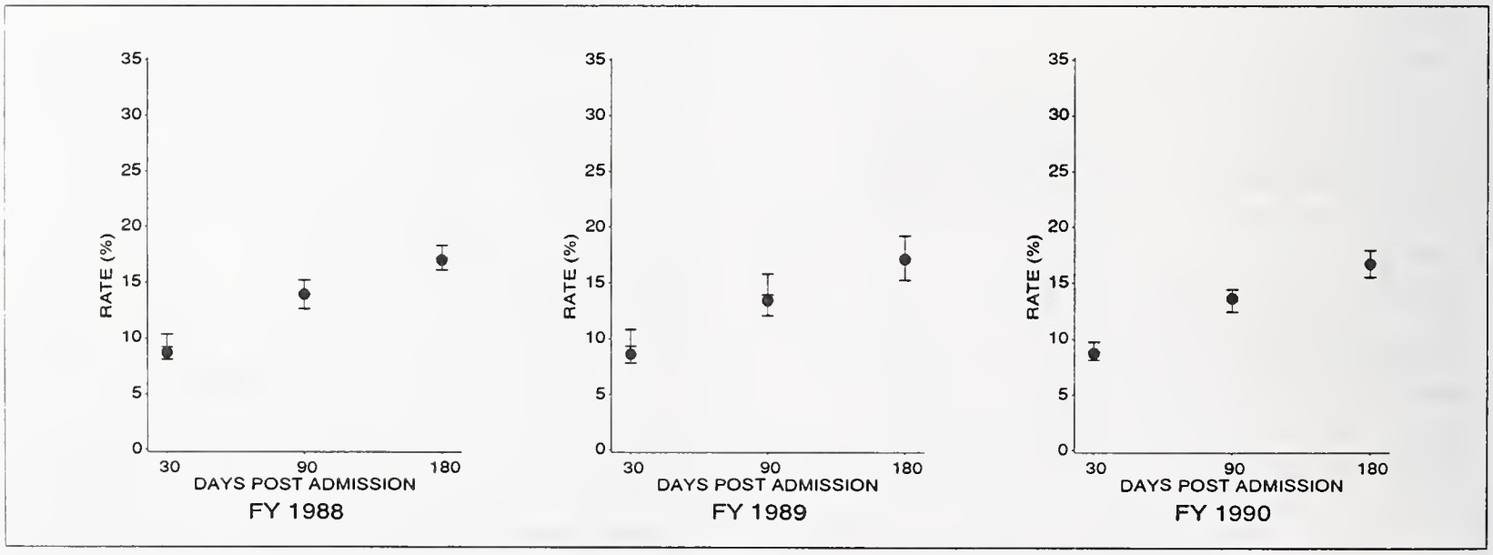
22 HOSPITAL PLACE
HACKENSACK, NJ 07601
Medicare Provider Number: 310001

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	4962	8.7	8.9	0.4	13.6	13.4	0.5	16.7	16.7	0.6
CONDITIONS:										
Acute Myocardial Infarction	192	25.0	27.1	4.1	28.1	30.2	4.1	30.2	32.8	4.6
Congestive Heart Failure	259	18.9	15.3	2.5	32.4	24.1	3.7	39.0	30.4	3.9
Pneumonia/Influenza	147	17.0	19.8	5.7	21.1	26.5	6.3	26.5	30.5	6.8
Chronic Obstructive Pulmonary Disease	30	20.0	15.5	-----	30.0	24.4	-----	43.3	29.8	-----
Transient Cerebral Ischemia	74	2.7	2.1	2.0	2.7	4.7	3.0	6.8	7.5	3.4
Stroke	170	21.2	21.4	3.3	27.1	29.0	3.8	30.6	32.9	4.6
Hip Fracture	122	5.7	6.4	2.3	12.3	11.3	3.0	16.4	14.6	3.8
Sepsis	26	30.8	32.9	-----	46.2	44.2	-----	57.7	50.1	-----
PROCEDURES:										
Angioplasty	165	3.0	3.6	2.0	3.0	4.8	2.0	3.0	5.8	2.5
Coronary Artery Bypass Graft	213	8.5	6.4	3.5	11.3	9.5	3.5	13.1	10.8	3.3
Initial Pacemaker Insertion	43	4.7	3.4	-----	4.7	6.3	-----	4.7	8.7	-----
Carotid Endarterectomy	13	0.0	1.9	-----	7.7	3.5	-----	7.7	5.4	-----
Hip Replacement/Reconstruction	97	1.0	3.6	2.5	5.2	6.7	3.5	6.2	9.1	3.5
Open Reduction of Hip Fracture	49	10.2	6.7	-----	16.3	12.2	-----	22.4	15.8	-----
Prostatectomy	232	2.2	1.1	0.9	4.3	2.6	1.4	5.6	4.4	2.6
Cholecystectomy	68	2.9	2.6	2.2	2.9	4.8	3.0	2.9	6.6	3.9
Hysterectomy	42	0.0	0.5	-----	0.0	1.1	-----	2.4	1.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HACKENSACK MEDICAL CENTER
Medicare Provider Number: 310001

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.2 years
Proportion female	52.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	38.0 %
Transferred from skilled nursing facility	2.0 %
Admitted for elective procedure	34.0 %
Admitted for emergency	63.1 %

COMORBIDITIES:

Cancer	9.3 %
Chronic cardiovascular disease	48.5 %
Chronic liver disease	0.6 %
Chronic renal disease	2.4 %
Chronic pulmonary disease	9.0 %
Cerebrovascular degeneration	1.5 %
Diabetes mellitus	10.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	82.4%
State	12.6%
Outside State	5.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.3 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1989

PROFILE:

Total Beds	539
Occupancy Rate	89.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	30.2 %
Case Mix Index (CMI)	1.5217

STAFFING:

Total Number of Physicians	449
Percent of Physicians Board Certified Specialists	79.1 %
Medical Residents/Interns	76
Registered Nurses	954
Licensed Practical Nurses	33

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	Yes
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

* Not used in calculating mortality rates

HACKETTSTOWN COMMUNITY HOSPITAL

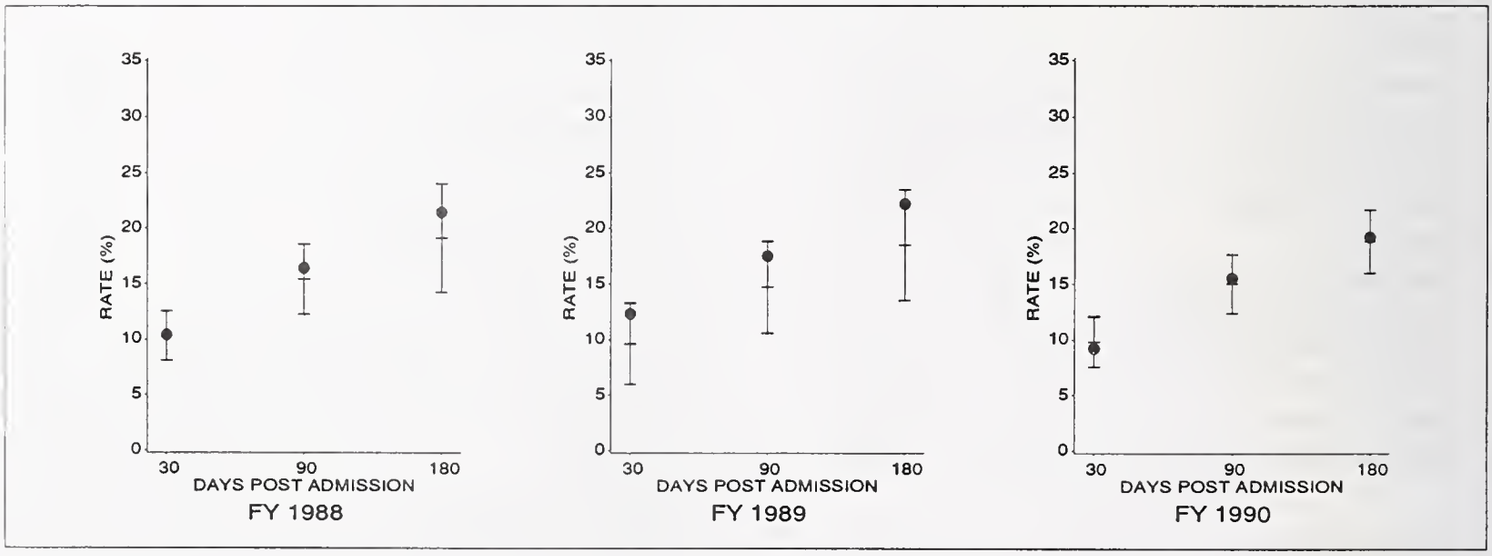
651 WILLOW GROVE ST
HACKETTSTOWN, NJ 07840
Medicare Provider Number: 310115

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	833	9.2	9.8	1.1	15.5	15.0	1.3	19.2	18.8	1.4
CONDITIONS:										
Acute Myocardial Infarction	22	22.7	24.4	-----	27.3	27.8	-----	27.3	30.8	-----
Congestive Heart Failure	41	19.5	16.1	-----	34.1	25.6	-----	46.3	32.3	-----
Pneumonia/Influenza	70	17.1	20.0	5.2	31.4	27.1	6.2	38.6	31.4	7.7
Chronic Obstructive Pulmonary Disease	15	13.3	11.0	-----	26.7	19.0	-----	26.7	24.7	-----
Transient Cerebral Ischemia	39	0.0	2.9	-----	5.1	6.0	-----	7.7	9.3	-----
Stroke	28	46.4	25.7	-----	50.0	33.6	-----	53.6	37.8	-----
Hip Fracture	30	3.3	6.5	-----	6.7	11.7	-----	10.0	15.5	-----
Sepsis	9	33.3	18.9	-----	44.4	24.3	-----	44.4	28.2	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	19	0.0	3.3	-----	0.0	6.1	-----	15.8	9.0	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	6	0.0	4.2	-----	0.0	8.0	-----	0.0	10.3	-----
Open Reduction of Hip Fracture	26	3.8	5.4	-----	7.7	10.0	-----	11.5	13.6	-----
Prostatectomy	24	0.0	1.3	-----	4.2	3.0	-----	8.3	5.2	-----
Cholecystectomy	13	7.7	3.2	-----	7.7	5.7	-----	7.7	7.8	-----
Hysterectomy	3	0.0	3.8	-----	0.0	8.9	-----	33.3	14.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HACKETTSTOWN COMMUNITY HOSPITAL
Medicare Provider Number: 310115

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	78.3 years
Proportion female	64.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	30.3 %
Transferred from skilled nursing facility	10.3 %
Admitted for elective procedure	19.6 %
Admitted for emergency	56.3 %

COMORBIDITIES:

Cancer	5.2 %
Chronic cardiovascular disease	39.3 %
Chronic liver disease	0.7 %
Chronic renal disease	1.1 %
Chronic pulmonary disease	12.1 %
Cerebrovascular degeneration	5.0 %
Diabetes mellitus	5.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	63.3%
State	32.2%
Outside State	4.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.7 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	106
Occupancy Rate	58.0 %
Ownership/Control	Church
Medicare Discharges	33.2 %
Case Mix Index (CMI)	1.1594

STAFFING:

Total Number of Physicians	86
Percent of Physicians Board Certified Specialists	60.5 %
Medical Residents/Interns	0
Registered Nurses	96
Licensed Practical Nurses	15

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

HAMILTON HOSPITAL

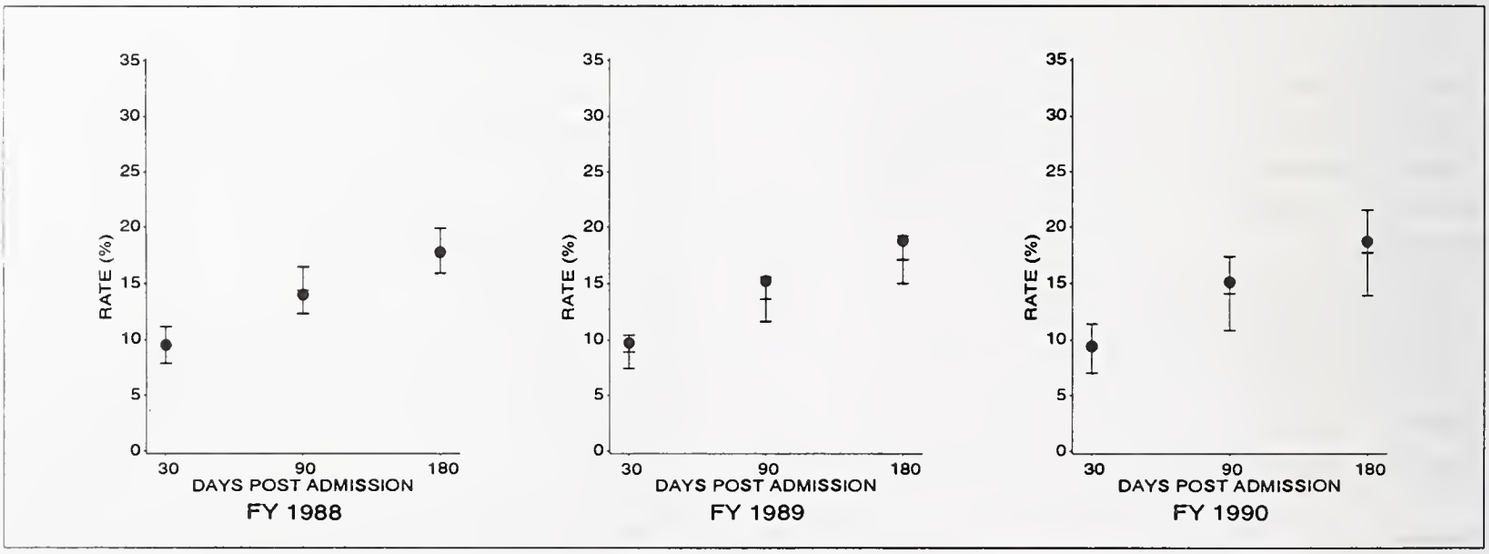
1881 WHITEHORSE-HAMILTON SQUARE RD
TRENTON, NJ 08690
Medicare Provider Number: 310110

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1529	9.4	9.2	1.1	15.1	14.1	1.6	18.7	17.7	1.9
CONDITIONS:										
Acute Myocardial Infarction	64	21.9	24.7	6.4	25.0	27.3	6.5	28.1	29.7	6.1
Congestive Heart Failure	107	12.1	14.1	3.7	21.5	22.5	4.1	27.1	29.0	4.8
Pneumonia/Influenza	82	22.0	21.5	8.0	39.0	28.9	7.4	45.1	33.4	8.0
Chronic Obstructive Pulmonary Disease	32	3.1	6.4	-----	9.4	11.3	-----	15.6	15.7	-----
Transient Cerebral Ischemia	48	6.3	2.6	-----	8.3	5.5	-----	12.5	8.5	-----
Stroke	55	20.0	18.3	5.4	27.3	24.0	6.5	32.7	27.3	7.5
Hip Fracture	52	1.9	7.6	6.9	11.5	12.8	5.0	15.4	16.3	5.2
Sepsis	26	15.4	22.8	-----	34.6	31.7	-----	38.5	36.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	18	0.0	3.4	-----	5.6	7.2	-----	11.1	10.6	-----
Carotid Endarterectomy	5	0.0	2.0	-----	0.0	3.5	-----	0.0	4.8	-----
Hip Replacement/Reconstruction	26	0.0	6.2	-----	19.2	10.6	-----	19.2	13.3	-----
Open Reduction of Hip Fracture	32	3.1	6.4	-----	6.3	11.2	-----	12.5	14.7	-----
Prostatectomy	27	0.0	0.8	-----	0.0	2.0	-----	0.0	3.5	-----
Cholecystectomy	22	0.0	2.9	-----	4.5	5.1	-----	4.5	6.7	-----
Hysterectomy	8	0.0	0.6	-----	0.0	1.5	-----	0.0	2.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HAMILTON HOSPITAL
Medicare Provider Number: 310110

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	76.4 years
Proportion female	61.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	27.1 %
Transferred from skilled nursing facility	0.7 %
Admitted for elective procedure	13.5 %
Admitted for emergency	69.3 %

COMORBIDITIES:

Cancer	6.1 %
Chronic cardiovascular disease	44.7 %
Chronic liver disease	0.7 %
Chronic renal disease	2.1 %
Chronic pulmonary disease	18.0 %
Cerebrovascular degeneration	2.3 %
Diabetes mellitus	7.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	82.0%
State	15.4%
Outside State	2.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.3 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	166
Occupancy Rate	66.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	45.0 %
Case Mix Index (CMI)	1.1815

STAFFING:

Total Number of Physicians	130
Percent of Physicians Board Certified Specialists	60.8 %
Medical Residents/Interns	0
Registered Nurses	108
Licensed Practical Nurses	35

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

* Not used in calculating mortality rates

HELENE FULD MEDICAL CENTER

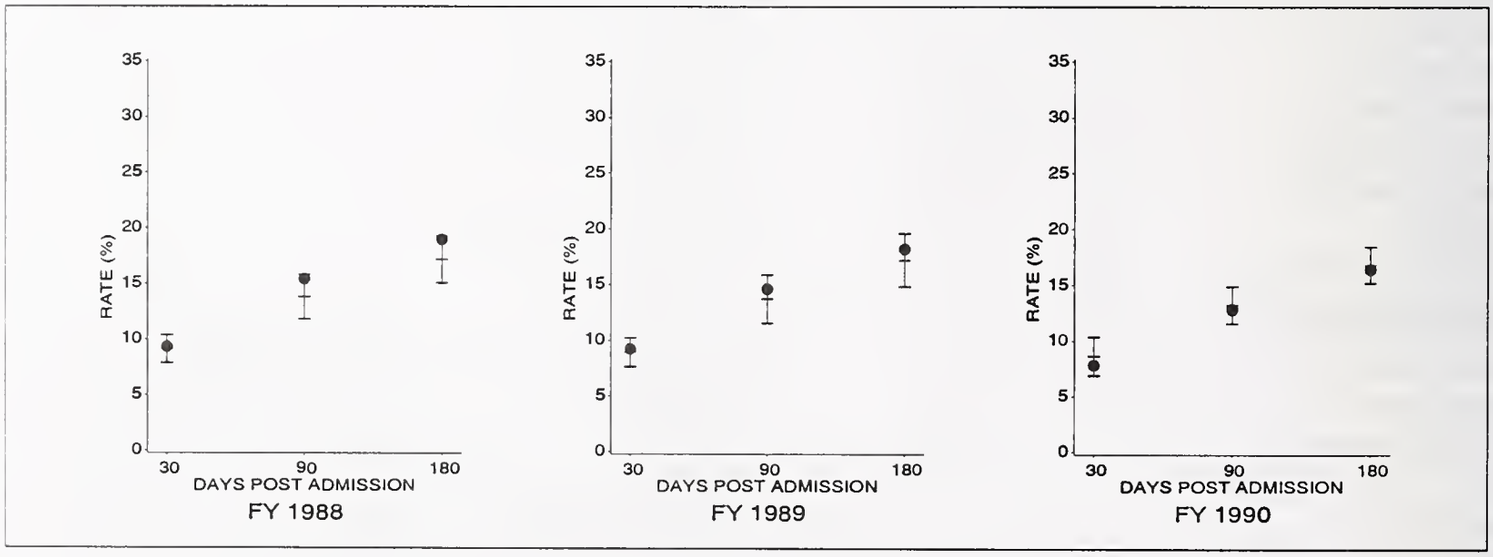
750 BRUNSWICK AVE
TRENTON, NJ 08638
Medicare Provider Number: 310092

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2180	7.8	8.6	0.9	12.8	13.2	0.8	16.4	16.8	0.8
CONDITIONS:										
Acute Myocardial Infarction	68	26.5	27.6	5.6	30.9	30.6	6.5	33.8	33.3	6.3
Congestive Heart Failure	128	10.2	13.5	4.4	18.0	21.5	6.7	21.9	27.6	8.0
Pneumonia/Influenza	110	15.5	17.4	5.5	20.9	23.6	4.8	25.5	27.7	4.7
Chronic Obstructive Pulmonary Disease	24	4.2	9.0	-----	4.2	15.6	-----	12.5	20.3	-----
Transient Cerebral Ischemia	66	0.0	1.7	3.2	3.0	3.7	4.7	9.1	5.8	5.3
Stroke	63	19.0	22.3	7.5	28.6	28.6	6.1	30.2	32.2	6.5
Hip Fracture	28	7.1	4.5	-----	14.3	7.9	-----	17.9	10.3	-----
Sepsis	35	22.9	25.9	-----	25.7	33.4	-----	28.6	37.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	30	3.3	2.7	-----	13.3	5.4	-----	20.0	8.2	-----
Carotid Endarterectomy	12	0.0	1.6	-----	0.0	2.8	-----	0.0	3.9	-----
Hip Replacement/Reconstruction	15	6.7	4.4	-----	6.7	8.7	-----	6.7	11.7	-----
Open Reduction of Hip Fracture	17	5.9	4.0	-----	17.6	7.1	-----	23.5	9.5	-----
Prostatectomy	54	3.7	1.3	2.5	5.6	3.1	3.2	5.6	5.3	3.1
Cholecystectomy	35	0.0	2.2	-----	0.0	3.9	-----	5.7	4.8	-----
Hysterectomy	16	0.0	0.2	-----	0.0	0.4	-----	0.0	0.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HELENE FULD MEDICAL CENTER

Medicare Provider Number: 310092

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.0 years
Proportion female	53.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	39.4 %
Transferred from skilled nursing facility	0.3 %
Admitted for elective procedure	23.6 %
Admitted for emergency	66.6 %

COMORBIDITIES:

Cancer	8.2 %
Chronic cardiovascular disease	39.6 %
Chronic liver disease	1.1 %
Chronic renal disease	9.7 %
Chronic pulmonary disease	13.0 %
Cerebrovascular degeneration	4.0 %
Diabetes mellitus	10.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	87.8%
State	5.8%
Outside State	6.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	12.5 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	342
Occupancy Rate	72.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	37.2 %
Case Mix Index (CMI)	1.2468

STAFFING:

Total Number of Physicians	117
Percent of Physicians Board Certified Specialists	73.5 %
Medical Residents/Interns	29
Registered Nurses	268
Licensed Practical Nurses	75

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

HOLY NAME HOSPITAL

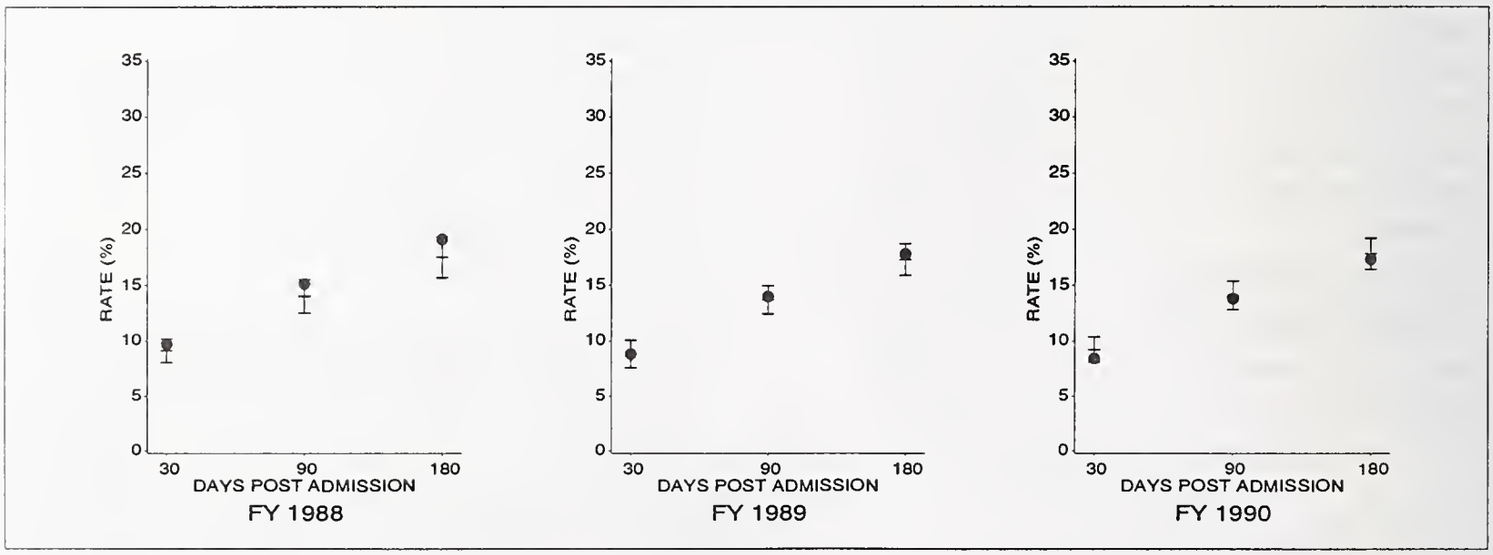
718 TEANECK RD
TEANECK, NJ 07666
Medicare Provider Number: 310008

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3219	8.4	9.2	0.6	13.8	14.1	0.6	17.3	17.8	0.7
CONDITIONS:										
Acute Myocardial Infarction	98	33.7	30.1	5.3	41.8	33.3	6.1	43.9	36.1	6.0
Congestive Heart Failure	206	12.6	14.6	4.0	22.8	23.3	4.0	27.2	29.6	3.9
Pneumonia/Influenza	113	14.2	17.2	4.5	21.2	23.5	4.5	24.8	27.5	5.2
Chronic Obstructive Pulmonary Disease	41	14.6	11.7	-----	17.1	19.4	-----	17.1	24.5	-----
Transient Cerebral Ischemia	60	0.0	2.0	3.2	6.7	4.5	3.0	8.3	7.1	4.3
Stroke	133	21.1	22.5	3.7	29.3	28.8	4.6	36.1	32.7	4.9
Hip Fracture	86	3.5	6.2	5.1	9.3	11.0	6.5	12.8	14.3	5.7
Sepsis	80	32.5	31.2	5.8	43.8	38.5	7.3	46.2	43.4	7.2
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	39	0.0	3.0	-----	5.1	5.9	-----	10.3	8.6	-----
Carotid Endarterectomy	1	0.0	0.4	-----	0.0	1.1	-----	0.0	2.0	-----
Hip Replacement/Reconstruction	64	3.1	4.6	3.0	9.4	8.6	3.6	10.9	11.5	4.8
Open Reduction of Hip Fracture	48	4.2	5.8	-----	8.3	10.3	-----	12.5	13.4	-----
Prostatectomy	109	0.9	0.8	0.9	3.7	1.9	1.9	3.7	3.1	2.1
Cholecystectomy	63	0.0	4.5	4.2	1.6	7.4	5.5	4.8	9.3	5.7
Hysterectomy	18	0.0	1.4	-----	0.0	3.2	-----	11.1	5.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HOLY NAME HOSPITAL
Medicare Provider Number: 310008

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.1 years
Proportion female	59.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	38.1 %
Transferred from skilled nursing facility	1.0 %
Admitted for elective procedure	29.3 %
Admitted for emergency	53.5 %

COMORBIDITIES:

Cancer	9.7 %
Chronic cardiovascular disease	35.1 %
Chronic liver disease	0.8 %
Chronic renal disease	4.7 %
Chronic pulmonary disease	11.4 %
Cerebrovascular degeneration	2.9 %
Diabetes mellitus	7.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	82.2%
State	12.8%
Outside State	5.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.5 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	370
Occupancy Rate	76.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.2908

STAFFING:

Total Number of Physicians	(Not Available)
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	0
Registered Nurses	321
Licensed Practical Nurses	46

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

HOSPITAL CENTER AT ORANGE

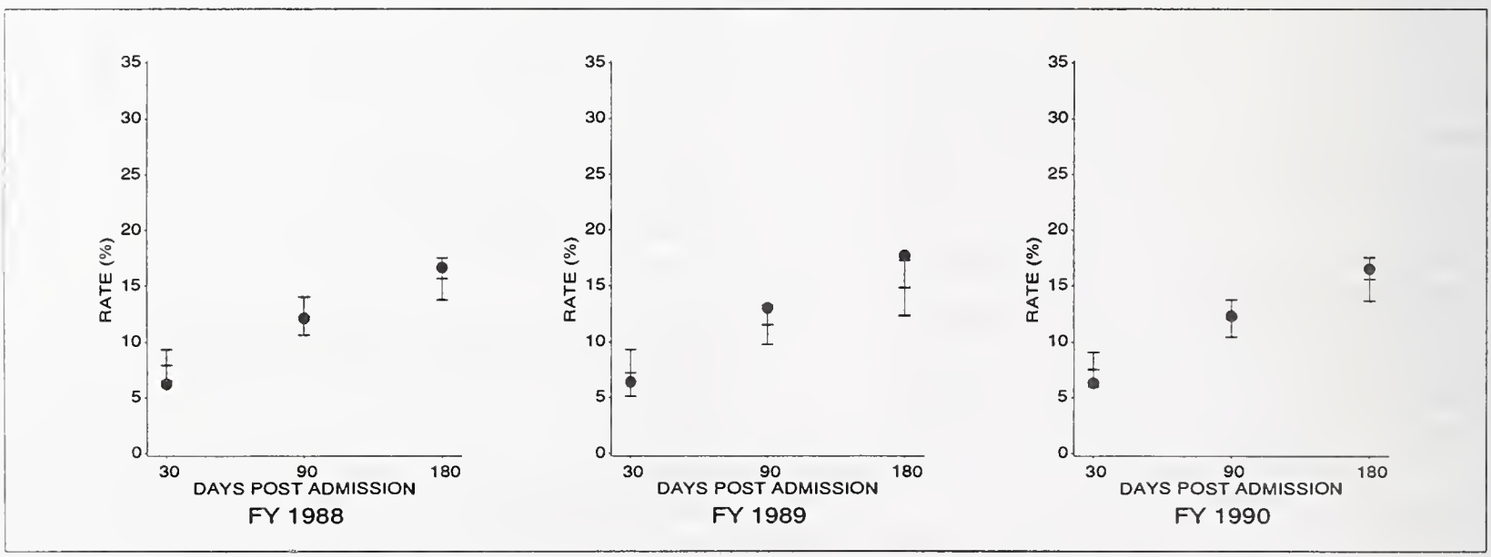
188 S ESSEX AVE
ORANGE, NJ 07050
Medicare Provider Number: 310078

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1994	6.3	7.5	0.8	12.3	12.1	0.8	16.5	15.6	1.0
CONDITIONS:										
Acute Myocardial Infarction	23	21.7	24.1	-----	26.1	26.7	-----	26.1	29.5	-----
Congestive Heart Failure	102	13.7	13.3	3.5	21.6	21.2	4.1	27.5	26.9	4.5
Pneumonia/Influenza	59	22.0	16.4	5.3	30.5	22.1	8.0	39.0	25.8	8.1
Chronic Obstructive Pulmonary Disease	48	4.2	11.6	-----	18.8	19.5	-----	18.8	24.6	-----
Transient Cerebral Ischemia	41	0.0	2.1	-----	7.3	4.9	-----	12.2	8.1	-----
Stroke	66	12.1	19.6	6.1	27.3	26.8	5.6	33.3	31.0	6.5
Hip Fracture	36	2.8	6.8	-----	11.1	12.3	-----	22.2	15.9	-----
Sepsis	13	15.4	28.6	-----	23.1	37.1	-----	30.8	41.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	33	6.1	3.2	-----	12.1	6.7	-----	15.2	9.8	-----
Carotid Endarterectomy	6	0.0	1.1	-----	0.0	2.0	-----	0.0	2.7	-----
Hip Replacement/Reconstruction	48	2.1	2.2	-----	4.2	4.3	-----	8.3	5.9	-----
Open Reduction of Hip Fracture	16	6.3	4.9	-----	6.3	9.1	-----	18.8	12.1	-----
Prostatectomy	101	1.0	1.4	1.2	2.0	3.4	2.2	5.0	5.9	2.7
Cholecystectomy	23	0.0	4.9	-----	8.7	9.3	-----	13.0	12.6	-----
Hysterectomy	12	0.0	0.8	-----	8.3	1.7	-----	16.7	2.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HOSPITAL CENTER AT ORANGE
Medicare Provider Number: 310078

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.5 years
Proportion female	63.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	44.0 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	43.4 %
Admitted for emergency	54.5 %

COMORBIDITIES:

Cancer	9.8 %
Chronic cardiovascular disease	33.3 %
Chronic liver disease	0.8 %
Chronic renal disease	2.9 %
Chronic pulmonary disease	11.5 %
Cerebrovascular degeneration	3.5 %
Diabetes mellitus	12.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	88.2%
State	10.1%
Outside State	1.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	15.2 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1989

PROFILE:

Total Beds	325
Occupancy Rate	80.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	27.7 %
Case Mix Index (CMI)	1.2439

STAFFING:

Total Number of Physicians	(Not Available)
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	(Not Available)
Registered Nurses	(Not Available)
Licensed Practical Nurses	(Not Available)

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

HUNTERDON MEDICAL CENTER

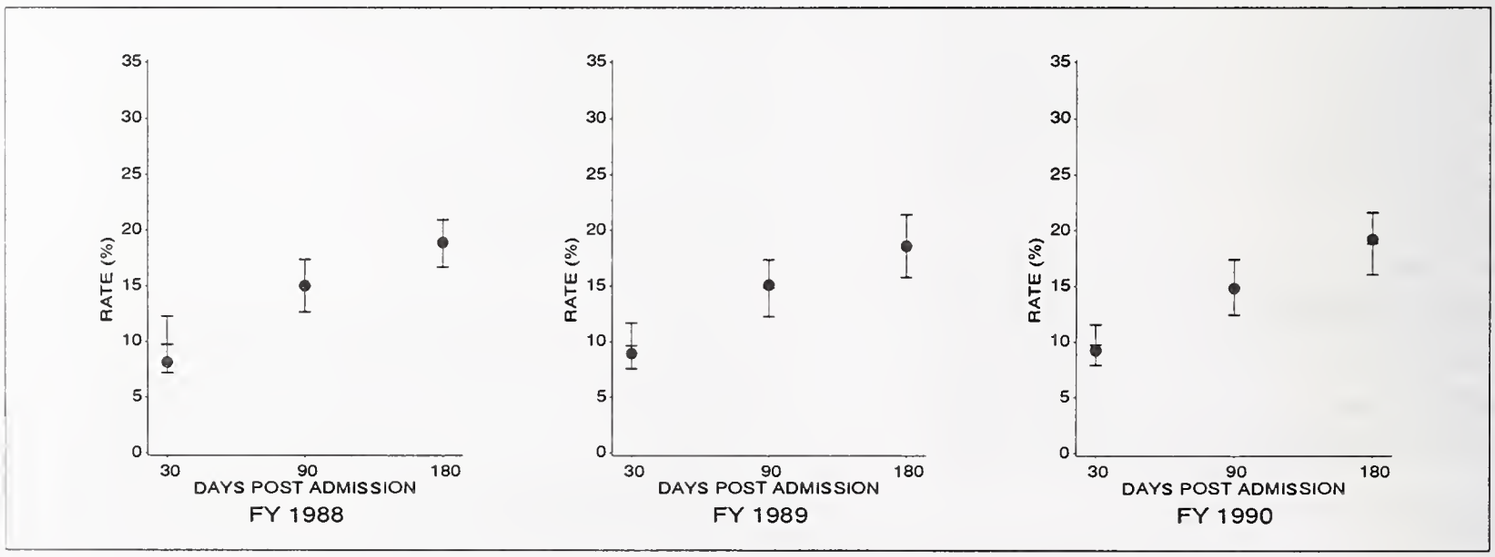
RT 31
FLEMINGTON, NJ 08822
Medicare Provider Number: 310005

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1403	9.2	9.7	0.9	14.8	14.9	1.3	19.2	18.8	1.4
CONDITIONS:										
Acute Myocardial Infarction	64	28.1	27.6	6.1	37.5	30.9	9.3	42.2	33.7	9.0
Congestive Heart Failure	53	5.7	17.1	11.7	17.0	27.0	12.2	30.2	34.0	11.6
Pneumonia/Influenza	83	20.5	18.7	6.0	26.5	26.0	6.0	32.5	30.9	5.4
Chronic Obstructive Pulmonary Disease	14	0.0	6.5	-----	7.1	11.4	-----	21.4	15.1	-----
Transient Cerebral Ischemia	24	0.0	1.6	-----	4.2	3.7	-----	8.3	6.0	-----
Stroke	75	20.0	20.5	5.0	30.7	27.3	5.6	36.0	31.2	6.3
Hip Fracture	51	7.8	6.0	3.9	9.8	10.7	5.4	11.8	14.2	7.8
Sepsis	18	22.2	22.9	-----	33.3	30.6	-----	38.9	35.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	12	8.3	5.1	-----	8.3	9.7	-----	8.3	14.1	-----
Carotid Endarterectomy	2	0.0	0.9	-----	0.0	1.9	-----	0.0	3.1	-----
Hip Replacement/Reconstruction	33	0.0	3.8	-----	3.0	6.7	-----	3.0	8.9	-----
Open Reduction of Hip Fracture	32	9.4	5.9	-----	12.5	10.9	-----	15.6	14.7	-----
Prostatectomy	39	0.0	0.6	-----	0.0	1.4	-----	0.0	2.4	-----
Cholecystectomy	25	0.0	1.9	-----	0.0	3.6	-----	4.0	4.8	-----
Hysterectomy	7	0.0	0.1	-----	0.0	0.4	-----	0.0	0.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HUNTERDON MEDICAL CENTER
Medicare Provider Number: 310005

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.9 years
Proportion female	58.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	42.1 %
Transferred from skilled nursing facility	6.8 %
Admitted for elective procedure	36.5 %
Admitted for emergency	1.6 %

COMORBIDITIES:

Cancer	11.2 %
Chronic cardiovascular disease	39.6 %
Chronic liver disease	1.3 %
Chronic renal disease	2.7 %
Chronic pulmonary disease	17.1 %
Cerebrovascular degeneration	5.4 %
Diabetes mellitus	8.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	74.6%
State	19.2%
Outside State	6.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.8 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	182
Occupancy Rate	69.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	30.9 %
Case Mix Index (CMI)	1.2459

STAFFING:

Total Number of Physicians	145
Percent of Physicians Board Certified Specialists	90.3 %
Medical Residents/Interns	17
Registered Nurses	151
Licensed Practical Nurses	22

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

IRVINGTON GENERAL HOSPITAL

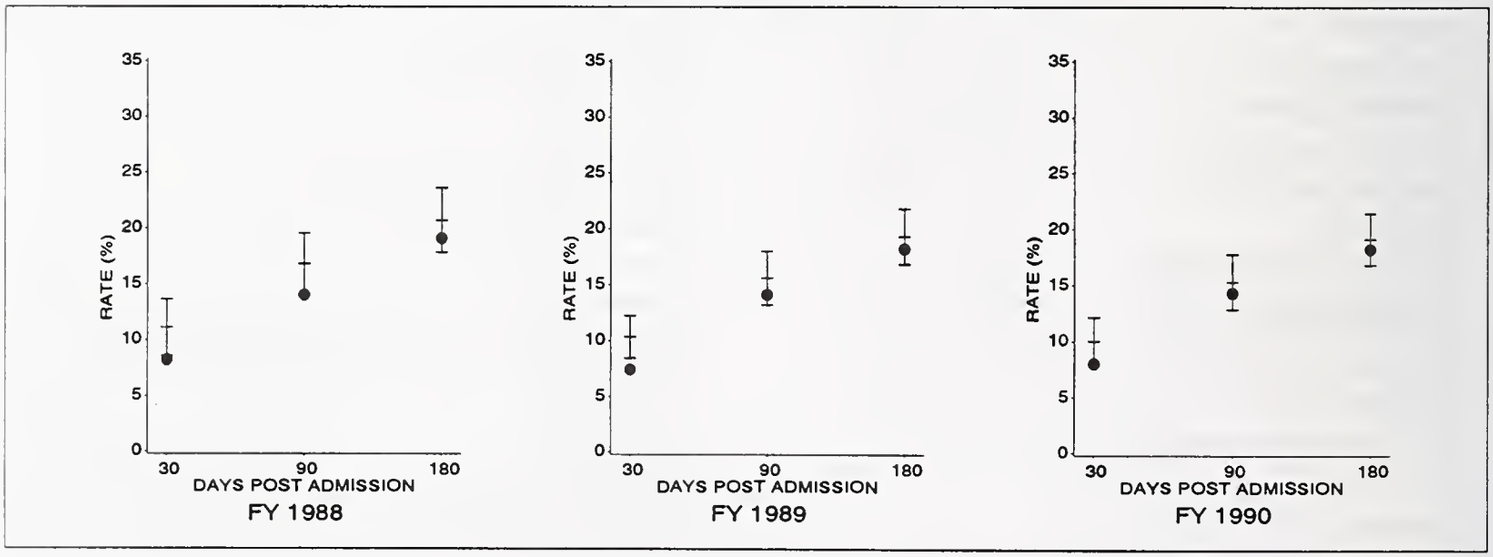
832 CHANCELLOR AVE
IRVINGTON, NJ 07111
Medicare Provider Number: 310013

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1214	8.0	10.0	1.1	14.3	15.3	1.2	18.2	19.1	1.2
CONDITIONS:										
Acute Myocardial Infarction	18	44.4	27.2	-----	61.1	30.3	-----	61.1	33.1	-----
Congestive Heart Failure	96	11.5	14.5	4.8	20.8	23.2	5.4	27.1	29.7	5.2
Pneumonia/Influenza	43	4.7	16.9	-----	11.6	23.3	-----	14.0	27.2	-----
Chronic Obstructive Pulmonary Disease	20	0.0	11.7	-----	10.0	19.9	-----	10.0	25.6	-----
Transient Cerebral Ischemia	29	0.0	2.1	-----	3.4	4.5	-----	6.9	6.9	-----
Stroke	51	9.8	17.2	6.5	21.6	23.7	6.6	29.4	27.5	7.0
Hip Fracture	33	6.1	6.8	-----	15.2	12.5	-----	15.2	16.6	-----
Sepsis	13	23.1	33.9	-----	38.5	43.0	-----	38.5	47.4	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	7	14.3	4.4	-----	28.6	9.1	-----	28.6	12.8	-----
Carotid Endarterectomy	1	0.0	1.4	-----	0.0	2.7	-----	0.0	3.9	-----
Hip Replacement/Reconstruction	12	16.7	6.1	-----	16.7	10.8	-----	16.7	14.2	-----
Open Reduction of Hip Fracture	16	0.0	6.1	-----	12.5	11.6	-----	12.5	15.7	-----
Prostatectomy	31	0.0	1.7	-----	9.7	3.9	-----	9.7	6.4	-----
Cholecystectomy	11	9.1	2.3	-----	9.1	3.9	-----	9.1	5.0	-----
Hysterectomy	6	0.0	1.5	-----	0.0	3.5	-----	0.0	5.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



IRVINGTON GENERAL HOSPITAL
Medicare Provider Number: 310013

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.3 years
Proportion female	65.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	34.3 %
Transferred from skilled nursing facility	2.3 %
Admitted for elective procedure	8.2 %
Admitted for emergency	62.6 %

COMORBIDITIES:

Cancer	6.8 %
Chronic cardiovascular disease	40.5 %
Chronic liver disease	2.1 %
Chronic renal disease	2.7 %
Chronic pulmonary disease	12.7 %
Cerebrovascular degeneration	3.3 %
Diabetes mellitus	11.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	81.5%
State	17.1%
Outside State	1.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	13.5 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1990

PROFILE:

Total Beds	157
Ownership/Control	District/Authority
Case Mix Index (CMI)	1.2561

STAFFING:

Medical Residents/Interns	6
Registered Nurses	99
Licensed Practical Nurses	7

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	Yes
Hospice Care	No
Intensive Care Unit	Yes
Organ Transplant	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

JERSEY CITY MEDICAL CENTER

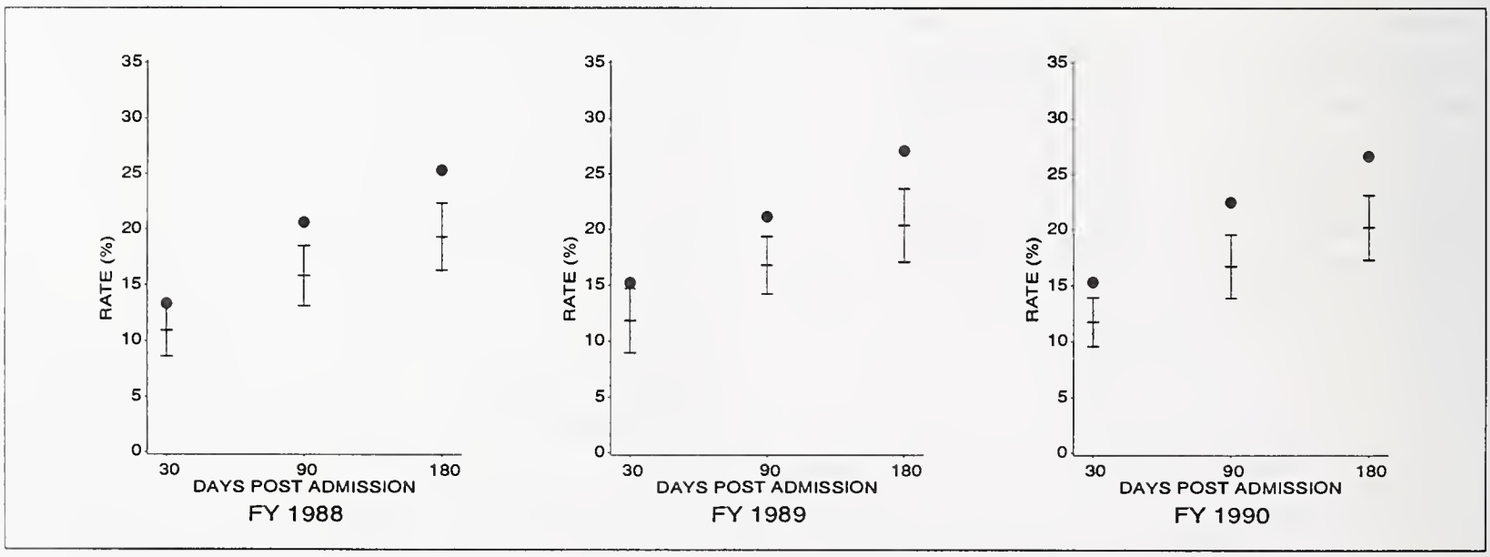
50 BALDWIN AVE
JERSEY CITY, NJ 07304
Medicare Provider Number: 310074

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	959	15.3	11.7	1.1	22.5	16.7	1.4	26.6	20.2	1.5
CONDITIONS:										
Acute Myocardial Infarction	28	25.0	28.9	-----	35.7	31.3	-----	35.7	34.0	-----
Congestive Heart Failure	67	11.9	15.3	6.3	16.4	24.2	9.1	25.4	30.6	7.2
Pneumonia/Influenza	44	27.3	18.7	-----	34.1	25.5	-----	34.1	29.6	-----
Chronic Obstructive Pulmonary Disease	15	20.0	9.6	-----	46.7	16.7	-----	53.3	21.2	-----
Transient Cerebral Ischemia	15	0.0	1.5	-----	0.0	3.5	-----	0.0	5.9	-----
Stroke	36	50.0	25.8	-----	55.6	32.6	-----	58.3	36.7	-----
Hip Fracture	21	4.8	8.5	-----	28.6	14.4	-----	28.6	18.0	-----
Sepsis	10	70.0	44.5	-----	70.0	53.8	-----	80.0	58.4	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	1	0.0	10.0	-----	0.0	18.0	-----	0.0	22.5	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	10	0.0	4.1	-----	20.0	8.2	-----	20.0	12.2	-----
Open Reduction of Hip Fracture	14	7.1	8.4	-----	28.6	14.7	-----	28.6	18.5	-----
Prostatectomy	10	10.0	1.3	-----	10.0	3.1	-----	10.0	5.2	-----
Cholecystectomy	3	33.3	6.9	-----	33.3	13.0	-----	33.3	16.5	-----
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



JERSEY CITY MEDICAL CENTER
Medicare Provider Number: 310074

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	69.1 years
Proportion female	54.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	14.0 %
Transferred from skilled nursing facility	5.7 %
Admitted for elective procedure	6.7 %
Admitted for emergency	83.7 %

COMORBIDITIES:

Cancer	4.4 %
Chronic cardiovascular disease	33.7 %
Chronic liver disease	1.8 %
Chronic renal disease	8.0 %
Chronic pulmonary disease	10.7 %
Cerebrovascular degeneration	7.1 %
Diabetes mellitus	10.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	91.9%
State	4.8%
Outside State	3.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	15.1 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	447
Occupancy Rate	81.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	12.8 %
Case Mix Index (CMI)	1.3061

STAFFING:

Total Number of Physicians	304
Percent of Physicians Board Certified Specialists	51.6 %
Medical Residents/Interns	99
Registered Nurses	328
Licensed Practical Nurses	70

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

JERSEY SHORE MEDICAL CENTER

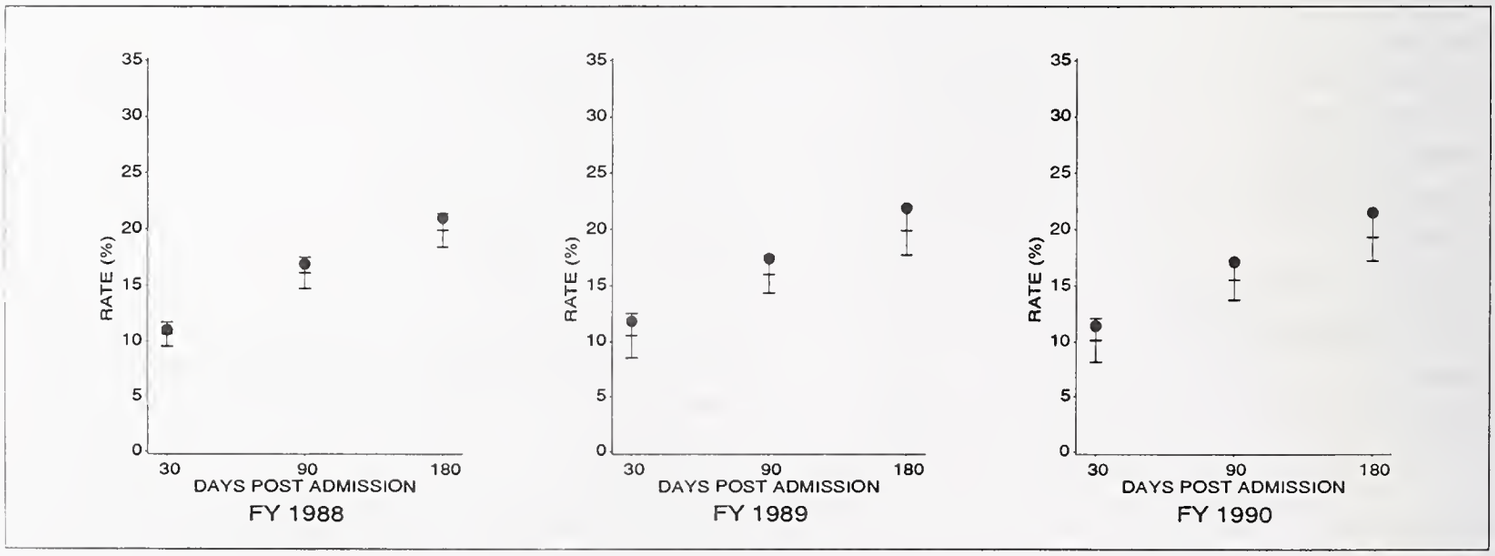
1945 CORLIES AVE
NEPTUNE, NJ 07753
Medicare Provider Number: 310073

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3783	11.4	10.1	1.0	17.1	15.5	0.9	21.5	19.3	1.1
CONDITIONS:										
Acute Myocardial Infarction	103	26.2	29.1	5.1	34.0	32.0	5.7	36.9	34.7	5.2
Congestive Heart Failure	220	19.1	17.4	2.9	27.3	27.2	3.4	32.3	34.1	4.3
Pneumonia/Influenza	140	25.7	20.6	5.7	33.6	28.0	6.8	36.4	32.6	6.0
Chronic Obstructive Pulmonary Disease	56	12.5	12.5	4.4	21.4	20.4	6.7	30.4	26.1	8.6
Transient Cerebral Ischemia	59	0.0	2.0	2.6	1.7	4.5	3.5	1.7	7.1	5.6
Stroke	136	21.3	24.6	4.6	32.4	31.8	4.1	36.8	35.7	4.9
Hip Fracture	104	11.5	7.6	4.2	15.4	13.4	4.1	19.2	17.4	4.1
Sepsis	41	34.1	29.9	-----	46.3	39.2	-----	48.8	44.4	-----
PROCEDURES:										
Angioplasty	2	50.0	5.8	-----	50.0	6.6	-----	50.0	7.8	-----
Coronary Artery Bypass Graft	25	8.0	4.6	-----	8.0	5.8	-----	12.0	6.7	-----
Initial Pacemaker Insertion	36	0.0	3.4	-----	2.8	7.0	-----	2.8	10.3	-----
Carotid Endarterectomy	4	0.0	1.1	-----	0.0	2.1	-----	25.0	3.0	-----
Hip Replacement/Reconstruction	57	1.8	4.1	3.3	8.8	7.7	3.6	15.8	10.1	6.0
Open Reduction of Hip Fracture	43	18.6	7.3	-----	20.9	13.3	-----	23.3	17.4	-----
Prostatectomy	61	3.3	1.5	2.1	3.3	3.5	3.0	4.9	6.0	4.8
Cholecystectomy	37	2.7	2.7	-----	2.7	4.8	-----	2.7	6.1	-----
Hysterectomy	19	0.0	0.8	-----	0.0	1.8	-----	0.0	2.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



JERSEY SHORE MEDICAL CENTER

Medicare Provider Number: 310073

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.1 years
Proportion female	59.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	33.7 %
Transferred from skilled nursing facility	7.7 %
Admitted for elective procedure	22.2 %
Admitted for emergency	63.9 %

COMORBIDITIES:

Cancer	7.6 %
Chronic cardiovascular disease	39.8 %
Chronic liver disease	1.4 %
Chronic renal disease	4.7 %
Chronic pulmonary disease	12.5 %
Cerebrovascular degeneration	4.6 %
Diabetes mellitus	7.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	82.9%
State	13.8%
Outside State	3.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	12.2 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1989

PROFILE:

Total Beds	482
Ownership.Control	Private, Non-Profit
Case Mix Index (CMI)	1.2375

STAFFING:

Medical Residents/Interns	20
Registered Nurses	244
Licensed Practical Nurses	98

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	Yes
Hospice Care	Yes
Intensive Care Unit	Yes
Organ Transplant	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

JOHN F KENNEDY MEDICAL CENTER

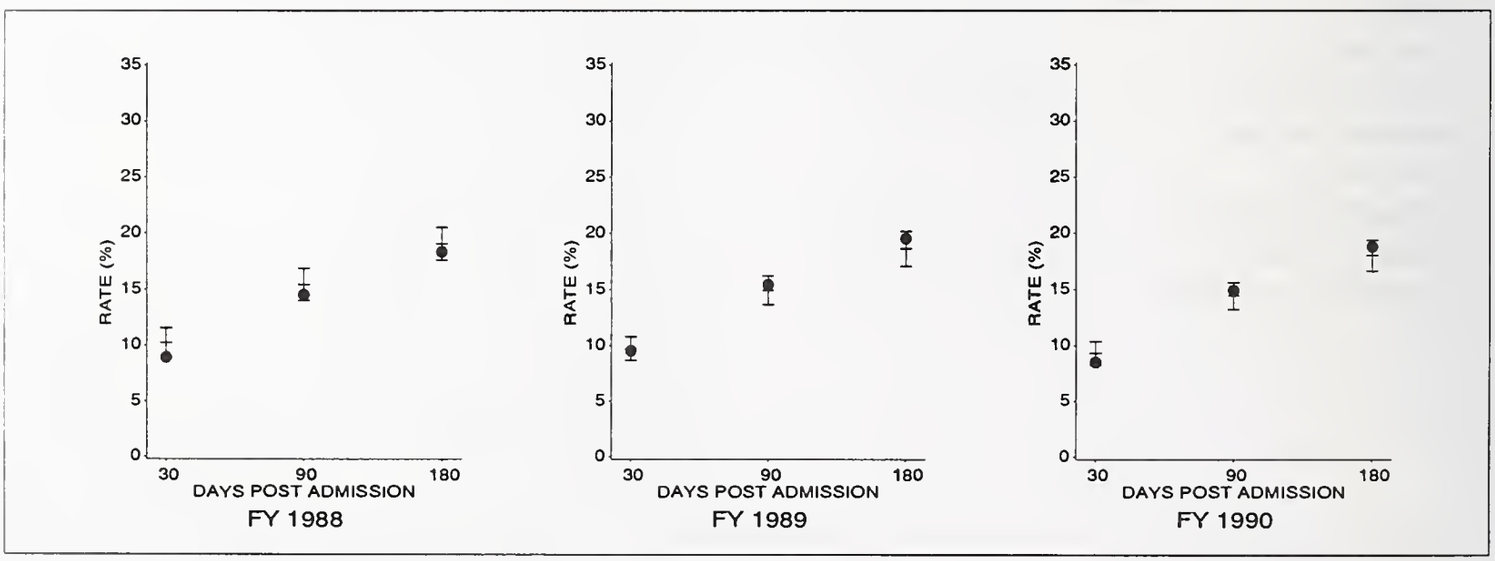
JAMES STREET
EDISON, NJ 08817
Medicare Provider Number: 310108

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3404	8.5	9.3	0.5	14.9	14.4	0.6	18.8	18.0	0.7
CONDITIONS:										
Acute Myocardial Infarction	92	32.6	27.2	5.5	39.1	30.1	6.8	43.5	32.9	7.5
Congestive Heart Failure	180	13.3	14.5	4.2	20.6	23.1	3.8	27.2	29.2	3.8
Pneumonia/Influenza	148	16.2	18.3	3.8	21.6	24.9	3.8	24.3	29.2	4.2
Chronic Obstructive Pulmonary Disease	57	5.3	10.3	4.6	12.3	16.7	5.3	24.6	21.5	5.9
Transient Cerebral Ischemia	92	0.0	1.8	2.0	3.3	3.8	2.3	6.5	5.9	2.7
Stroke	148	16.9	19.9	3.4	27.0	26.7	4.0	28.4	30.3	3.8
Hip Fracture	64	6.3	6.9	5.0	7.8	12.2	7.3	10.9	15.8	8.2
Sepsis	29	44.8	29.6	-----	69.0	38.8	-----	69.0	44.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	44	4.5	4.4	-----	11.4	8.0	-----	15.9	11.1	-----
Carotid Endarterectomy	18	0.0	1.4	-----	0.0	2.7	-----	0.0	4.0	-----
Hip Replacement/Reconstruction	56	5.4	3.7	4.1	8.9	7.2	4.9	10.7	9.7	4.8
Open Reduction of Hip Fracture	35	5.7	6.7	-----	5.7	12.4	-----	8.6	16.4	-----
Prostatectomy	130	0.0	1.0	1.3	0.0	2.3	2.4	1.5	3.8	2.5
Cholecystectomy	55	1.8	3.2	2.6	5.5	5.5	3.4	12.7	7.1	4.3
Hysterectomy	30	0.0	0.6	-----	0.0	1.3	-----	0.0	2.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



JOHN F KENNEDY MEDICAL CENTER

Medicare Provider Number: 310108

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.3 years
Proportion female	58.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	24.8 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	18.8 %
Admitted for emergency	71.5 %

COMORBIDITIES:

Cancer	9.9 %
Chronic cardiovascular disease	40.2 %
Chronic liver disease	0.9 %
Chronic renal disease	2.0 %
Chronic pulmonary disease	13.6 %
Cerebrovascular degeneration	3.1 %
Diabetes mellitus	8.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	81.7%
State	15.4%
Outside State	2.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	13.5 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	435
Occupancy Rate	92.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	27.2 %
Case Mix Index (CMI)	1.2179

STAFFING:

Total Number of Physicians	509
Percent of Physicians Board Certified Specialists	62.9 %
Medical Residents/Interns	21
Registered Nurses	425
Licensed Practical Nurses	128

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

KENNEDY MEM HOSPITAL AT SADDLE BROOK

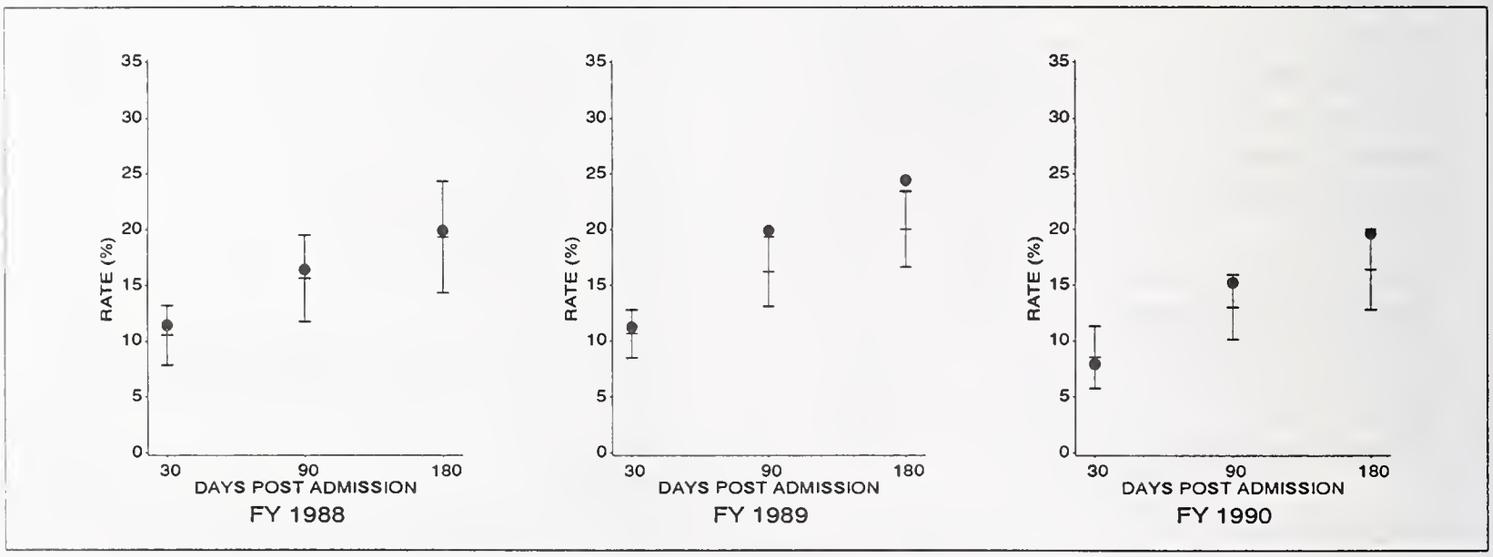
300 MARKET STREET
SADDLE BROOK, NJ 07662
Medicare Provider Number: 310085

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	846	7.9	8.5	1.4	15.2	13.0	1.5	19.6	16.4	1.8
CONDITIONS:										
Acute Myocardial Infarction	10	20.0	26.8	-----	30.0	29.2	-----	30.0	31.6	-----
Congestive Heart Failure	50	10.0	15.8	-----	20.0	24.8	-----	26.0	31.0	-----
Pneumonia/Influenza	51	15.7	16.4	11.3	27.5	22.3	11.2	29.4	26.2	10.1
Chronic Obstructive Pulmonary Disease	7	0.0	9.8	-----	0.0	15.1	-----	14.3	19.1	-----
Transient Cerebral Ischemia	18	0.0	1.4	-----	5.6	3.3	-----	5.6	5.5	-----
Stroke	22	22.7	24.5	-----	27.3	31.7	-----	40.9	35.4	-----
Hip Fracture	27	3.7	6.0	-----	11.1	10.6	-----	18.5	13.6	-----
Sepsis	9	22.2	24.9	-----	22.2	33.4	-----	22.2	38.4	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	8	0.0	2.7	-----	0.0	5.7	-----	0.0	8.5	-----
Carotid Endarterectomy	2	0.0	1.8	-----	0.0	3.0	-----	0.0	3.9	-----
Hip Replacement/Reconstruction	7	14.3	4.8	-----	28.6	8.9	-----	28.6	11.8	-----
Open Reduction of Hip Fracture	19	0.0	5.2	-----	5.3	9.5	-----	15.8	12.5	-----
Prostatectomy	15	0.0	0.9	-----	0.0	2.2	-----	0.0	3.7	-----
Cholecystectomy	18	5.6	1.7	-----	5.6	3.6	-----	11.1	5.3	-----
Hysterectomy	3	0.0	0.2	-----	0.0	0.5	-----	0.0	0.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



KENNEDY MEM HOSPITAL AT SADDLE BROOK

Medicare Provider Number: 310085

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.3 years
Proportion female	59.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	44.3 %
Transferred from skilled nursing facility	8.2 %
Admitted for elective procedure	24.3 %
Admitted for emergency	22.9 %

COMORBIDITIES:

Cancer	6.3 %
Chronic cardiovascular disease	31.8 %
Chronic liver disease	1.1 %
Chronic renal disease	0.8 %
Chronic pulmonary disease	11.0 %
Cerebrovascular degeneration	1.8 %
Diabetes mellitus	11.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	72.2%
State	24.8%
Outside State	3.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	12.8 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	112
Occupancy Rate	73.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	36.4 %
Case Mix Index (CMI)	1.2163

STAFFING:

Total Number of Physicians	155
Percent of Physicians Board Certified Specialists	68.4 %
Medical Residents/Interns	6
Registered Nurses	96
Licensed Practical Nurses	29

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

KENNEDY MEM HOSPITAL-UNIVERSITY MED CTR

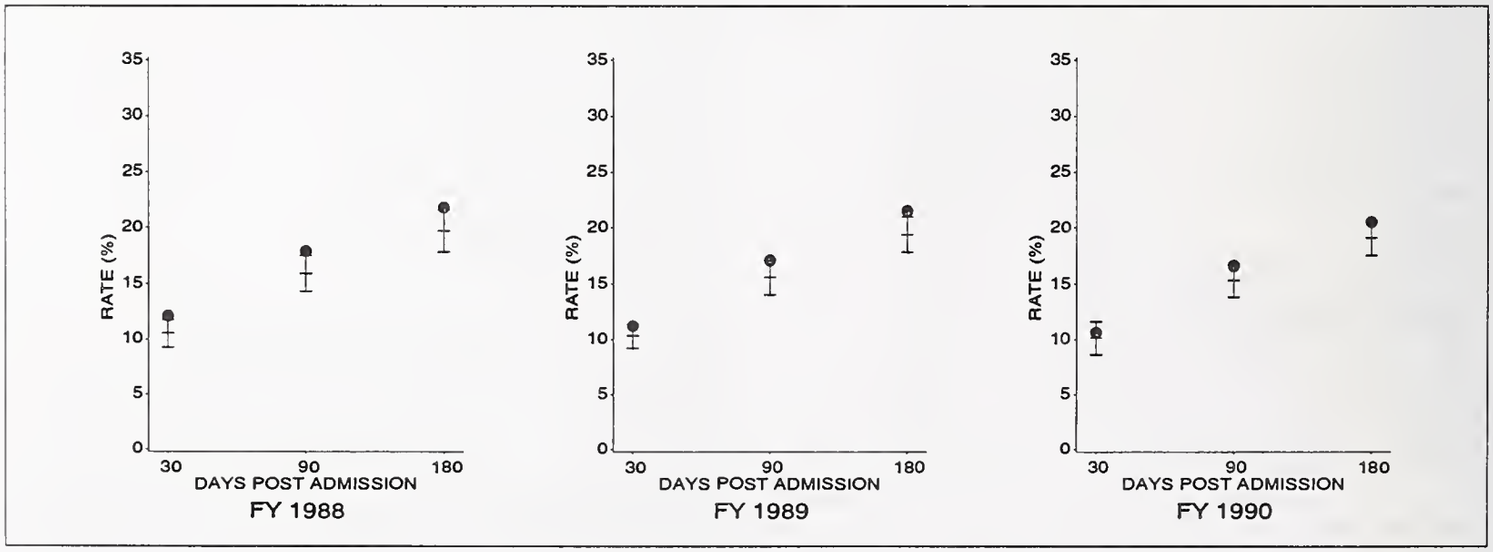
113 EAST LAUREL ROAD
STRATFORD, NJ 08084
Medicare Provider Number: 310086

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	4645	10.6	10.1	0.8	16.6	15.3	0.8	20.5	19.1	0.8
CONDITIONS:										
Acute Myocardial Infarction	162	23.5	23.2	3.8	27.2	26.7	3.5	29.6	29.5	3.7
Congestive Heart Failure	341	14.4	16.5	3.1	24.6	25.8	4.2	31.4	32.3	3.3
Pneumonia/Influenza	182	25.8	19.8	4.9	32.4	27.3	5.8	37.9	32.0	6.1
Chronic Obstructive Pulmonary Disease	67	16.4	10.0	5.8	25.4	17.1	8.2	32.8	22.6	8.9
Transient Cerebral Ischemia	81	3.7	2.1	2.8	7.4	4.5	4.1	7.4	7.1	4.4
Stroke	159	18.9	19.3	3.2	23.9	25.9	4.0	26.4	29.5	5.0
Hip Fracture	121	5.8	5.9	2.2	10.7	10.6	2.8	14.9	14.1	3.3
Sepsis	41	51.2	28.3	-----	56.1	36.7	-----	61.0	42.0	-----
PROCEDURES:										
Angioplasty	1	0.0	1.2	-----	0.0	2.1	-----	0.0	2.7	-----
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	18	11.1	4.5	-----	11.1	8.6	-----	16.7	12.1	-----
Carotid Endarterectomy	10	0.0	1.7	-----	0.0	3.4	-----	10.0	5.3	-----
Hip Replacement/Reconstruction	67	4.5	4.5	5.2	10.4	8.5	5.2	14.9	11.8	5.2
Open Reduction of Hip Fracture	57	5.3	5.4	3.0	12.3	10.0	4.4	14.0	13.3	4.9
Prostatectomy	164	0.0	0.9	1.2	0.0	2.2	2.3	2.4	3.7	1.8
Cholecystectomy	50	0.0	2.5	-----	0.0	4.7	-----	2.0	6.3	-----
Hysterectomy	19	0.0	1.1	-----	5.3	2.3	-----	10.5	3.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



KENNEDY MEM HOSPITAL-UNIVERSITY MED CTR

Medicare Provider Number: 310086

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.6 years
Proportion female	58.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	25.5 %
Transferred from skilled nursing facility	13.2 %
Admitted for elective procedure	14.0 %
Admitted for emergency	69.9 %

COMORBIDITIES:

Cancer	6.6 %
Chronic cardiovascular disease	34.7 %
Chronic liver disease	0.8 %
Chronic renal disease	2.8 %
Chronic pulmonary disease	13.4 %
Cerebrovascular degeneration	6.9 %
Diabetes mellitus	8.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	58.7%
State	37.4%
Outside State	3.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.4 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	530
Occupancy Rate	79.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	34.1 %
Case Mix Index (CMI)	1.1767

STAFFING:

Total Number of Physicians	550
Percent of Physicians Board Certified Specialists	61.8 %
Medical Residents/Interns	0
Registered Nurses	440
Licensed Practical Nurses	119

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

KIMBALL MEDICAL CENTER

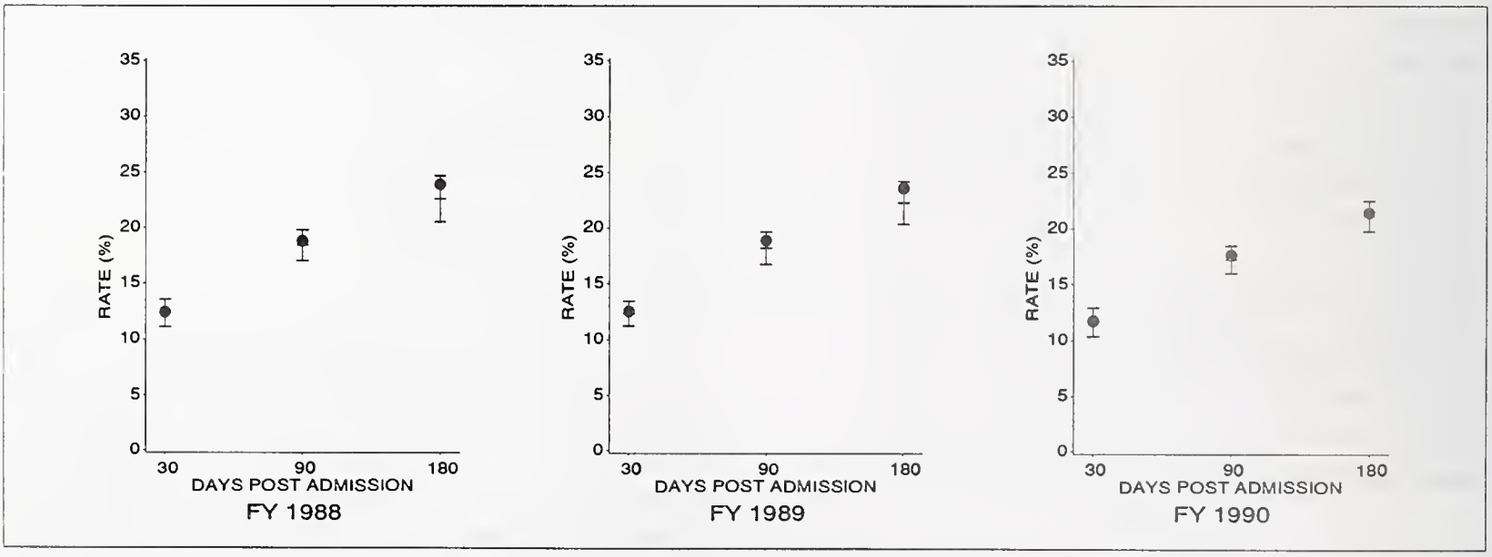
600 RIVER AVE
LAKEWOOD, NJ 08701
Medicare Provider Number: 310084

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	4089	11.7	11.6	0.6	17.6	17.2	0.6	21.4	21.1	0.7
CONDITIONS:										
Acute Myocardial Infarction	150	36.7	33.4	5.4	41.3	36.5	5.2	44.0	39.5	4.8
Congestive Heart Failure	244	17.2	17.9	3.8	32.8	27.6	4.0	41.0	34.4	4.4
Pneumonia/Influenza	211	22.7	25.1	3.5	36.0	34.0	4.3	41.2	39.4	4.9
Chronic Obstructive Pulmonary Disease	63	11.1	10.5	4.1	15.9	18.0	5.2	22.2	23.1	5.4
Transient Cerebral Ischemia	85	0.0	2.5	2.5	1.2	5.5	3.6	2.4	8.9	4.6
Stroke	158	20.9	21.6	3.5	25.9	28.8	4.9	31.0	32.9	4.7
Hip Fracture	136	2.9	7.3	2.8	9.6	13.0	3.5	11.8	17.0	3.9
Sepsis	99	35.4	40.7	6.2	43.4	50.7	7.2	50.5	56.0	7.8
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	25	8.0	5.2	-----	8.0	10.2	-----	12.0	14.6	-----
Carotid Endarterectomy	13	0.0	2.0	-----	0.0	3.7	-----	7.7	5.3	-----
Hip Replacement/Reconstruction	64	0.0	3.9	3.2	3.1	7.2	4.1	4.7	9.7	5.1
Open Reduction of Hip Fracture	47	4.3	6.7	-----	10.6	12.2	-----	12.8	16.4	-----
Prostatectomy	129	1.6	1.1	1.0	3.1	2.4	1.6	3.9	4.1	2.2
Cholecystectomy	60	1.7	2.8	3.2	1.7	4.6	4.2	1.7	5.8	4.7
Hysterectomy	26	0.0	0.6	-----	0.0	1.4	-----	0.0	2.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



KIMBALL MEDICAL CENTER

Medicare Provider Number: 310084

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	76.8 years
Proportion female	58.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	29.7 %
Transferred from skilled nursing facility	19.4 %
Admitted for elective procedure	21.9 %
Admitted for emergency	69.3 %

COMORBIDITIES:

Cancer	8.0 %
Chronic cardiovascular disease	41.2 %
Chronic liver disease	0.8 %
Chronic renal disease	2.2 %
Chronic pulmonary disease	12.4 %
Cerebrovascular degeneration	5.1 %
Diabetes mellitus	7.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	84.4%
State	12.5%
Outside State	3.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.7 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	331
Occupancy Rate	85.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	55.1 %
Case Mix Index (CMI)	1.1652

STAFFING:

Total Number of Physicians	115
Percent of Physicians Board Certified Specialists	66.1 %
Medical Residents/Interns	0
Registered Nurses	244
Licensed Practical Nurses	141

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

MEADOWLANDS HOSPITAL MEDICAL CENTER

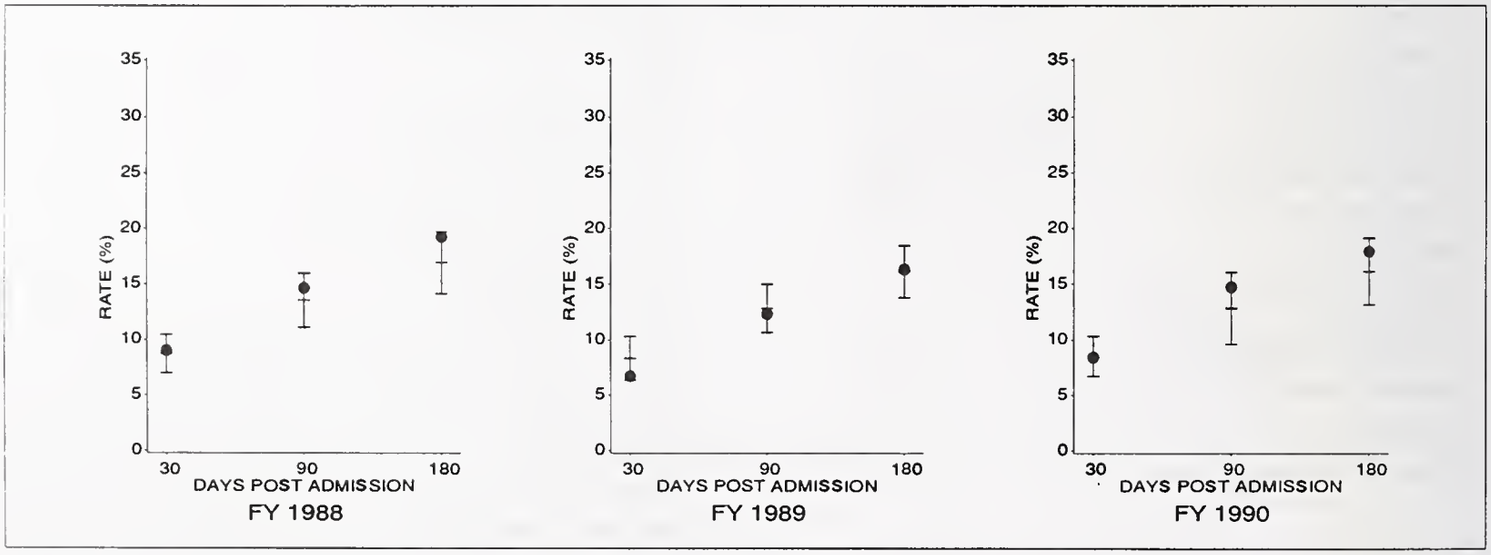
MEADOWLAND PARKWAY
SECAUCUS, NJ 07094
Medicare Provider Number: 310118

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1003	8.4	8.5	0.9	14.7	12.8	1.6	17.9	16.1	1.5
CONDITIONS:										
Acute Myocardial Infarction	19	52.6	30.7	-----	57.9	32.8	-----	57.9	35.3	-----
Congestive Heart Failure	75	18.7	13.9	6.2	30.7	22.5	9.2	37.3	28.4	9.5
Pneumonia/Influenza	33	15.2	13.4	-----	18.2	17.9	-----	18.2	21.2	-----
Chronic Obstructive Pulmonary Disease	36	5.6	8.2	-----	11.1	13.5	-----	16.7	17.6	-----
Transient Cerebral Ischemia	52	5.8	1.8	3.1	7.7	3.9	5.7	13.5	6.1	6.4
Stroke	30	10.0	19.3	-----	23.3	26.7	-----	33.3	30.6	-----
Hip Fracture	25	0.0	6.5	-----	8.0	11.3	-----	8.0	14.5	-----
Sepsis	15	26.7	28.9	-----	53.3	35.3	-----	53.3	39.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	12	33.3	3.9	-----	41.7	7.9	-----	50.0	11.6	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	9	0.0	3.1	-----	11.1	5.7	-----	11.1	7.5	-----
Open Reduction of Hip Fracture	19	0.0	6.3	-----	5.3	11.0	-----	5.3	14.4	-----
Prostatectomy	43	0.0	1.2	-----	0.0	2.6	-----	2.3	4.0	-----
Cholecystectomy	23	0.0	2.3	-----	4.3	4.3	-----	4.3	6.0	-----
Hysterectomy	12	0.0	0.6	-----	0.0	1.2	-----	0.0	2.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MEADOWLANDS HOSPITAL MEDICAL CENTER

Medicare Provider Number: 310118

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.6 years
Proportion female	57.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	46.2 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	38.7 %
Admitted for emergency	52.8 %

COMORBIDITIES:

Cancer	6.5 %
Chronic cardiovascular disease	47.0 %
Chronic liver disease	0.8 %
Chronic renal disease	2.0 %
Chronic pulmonary disease	16.7 %
Cerebrovascular degeneration	1.7 %
Diabetes mellitus	6.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	76.3%
State	20.6%
Outside State	3.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	14.4 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	200
Occupancy Rate	71.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	21.8 %
Case Mix Index (CMI)	1.2072

STAFFING:

Total Number of Physicians	435
Percent of Physicians Board Certified Specialists	49.7 %
Medical Residents/Interns	1
Registered Nurses	163
Licensed Practical Nurses	58

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

MEDICAL CENTER AT PRINCETON

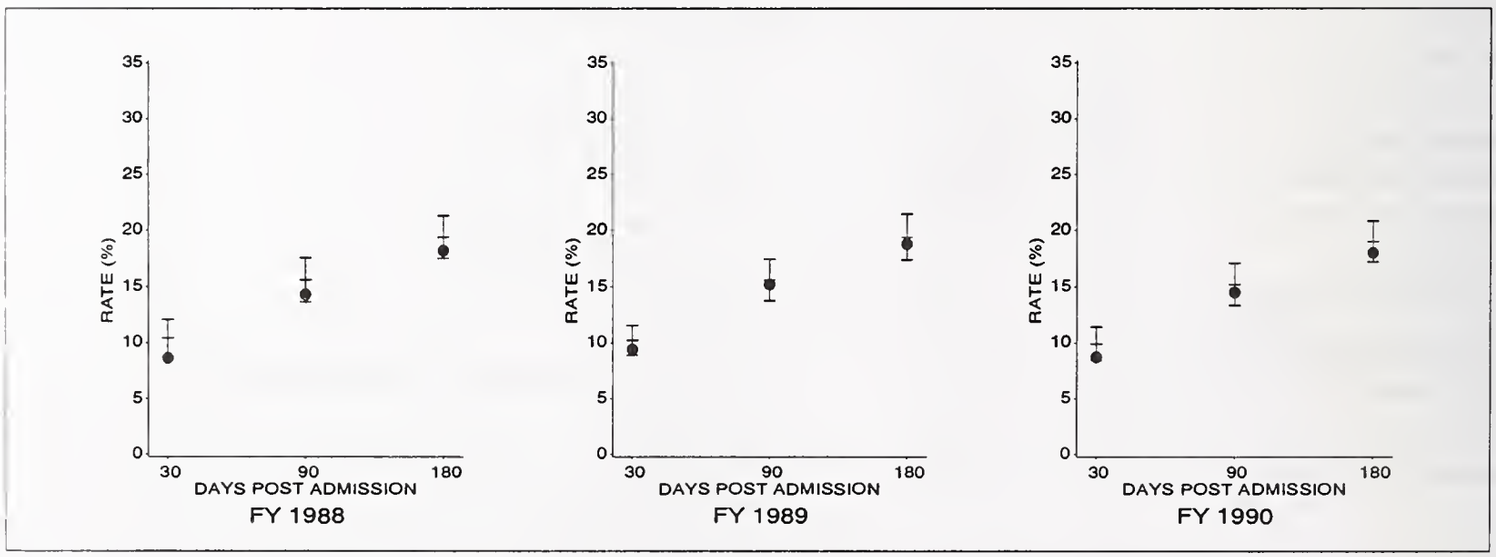
253 WITHERSPOON ST
PRINCETON, NJ 08540
Medicare Provider Number: 310010

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2857	8.7	9.9	0.8	14.5	15.2	0.9	18.0	19.0	0.9
CONDITIONS:										
Acute Myocardial Infarction	82	17.1	25.7	6.6	24.4	29.1	9.0	25.6	32.2	8.3
Congestive Heart Failure	129	15.5	15.6	6.3	21.7	24.5	6.8	27.1	31.0	6.1
Pneumonia/Influenza	119	22.7	18.0	5.3	29.4	24.0	6.3	34.5	28.0	6.6
Chronic Obstructive Pulmonary Disease	37	13.5	9.9	-----	13.5	16.2	-----	18.9	20.9	-----
Transient Cerebral Ischemia	37	0.0	1.6	-----	0.0	3.6	-----	2.7	5.7	-----
Stroke	111	15.3	24.2	5.5	27.9	31.1	4.5	31.5	35.0	4.9
Hip Fracture	87	5.7	6.5	4.5	14.9	11.5	5.7	19.5	15.0	6.5
Sepsis	32	9.4	18.7	-----	15.6	26.1	-----	21.9	30.2	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	34	0.0	2.8	-----	5.9	5.2	-----	8.8	7.6	-----
Carotid Endarterectomy	8	0.0	1.7	-----	0.0	3.2	-----	0.0	4.6	-----
Hip Replacement/Reconstruction	67	3.0	3.6	2.7	4.5	6.7	3.7	7.5	9.0	4.3
Open Reduction of Hip Fracture	43	4.7	6.0	-----	16.3	11.0	-----	20.9	14.6	-----
Prostatectomy	178	0.0	1.3	1.4	2.8	2.9	1.9	3.9	4.9	2.8
Cholecystectomy	60	3.3	2.1	3.5	6.7	3.7	4.3	6.7	4.8	4.4
Hysterectomy	19	0.0	0.7	-----	0.0	1.7	-----	0.0	2.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MEDICAL CENTER AT PRINCETON

Medicare Provider Number: 310010

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.7 years
Proportion female	55.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	0.6 %
Transferred from skilled nursing facility	2.2 %
Admitted for elective procedure	19.7 %
Admitted for emergency	61.1 %

COMORBIDITIES:

Cancer	11.4 %
Chronic cardiovascular disease	36.1 %
Chronic liver disease	1.1 %
Chronic renal disease	1.6 %
Chronic pulmonary disease	9.6 %
Cerebrovascular degeneration	3.9 %
Diabetes mellitus	5.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	42.2%
State	51.3%
Outside State	6.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.8 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	411
Occupancy Rate	80.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	38.1 %
Case Mix Index (CMI)	1.2104

STAFFING:

Total Number of Physicians	279
Percent of Physicians Board Certified Specialists	73.1 %
Medical Residents/Interns	0
Registered Nurses	361
Licensed Practical Nurses	65

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	Yes

* Not used in calculating mortality rates

MEMORIAL HOSPITAL-BURLINGTON COUNTY

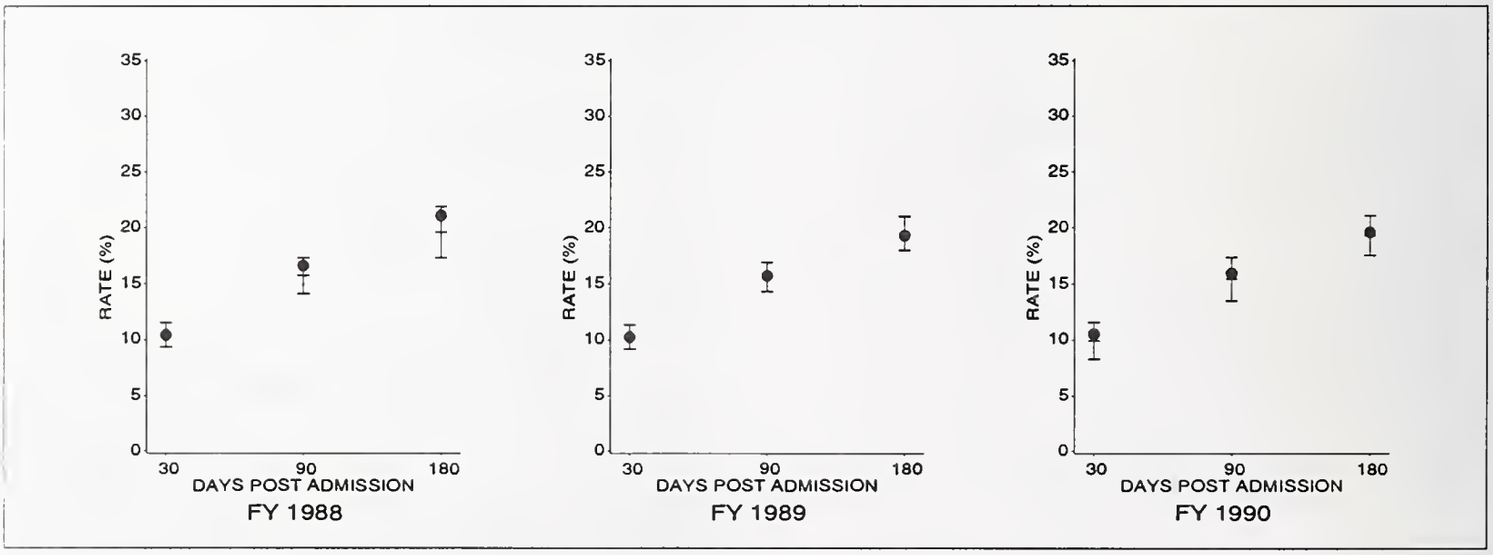
175 MADISON AVE
MOUNT HOLLY, NJ 08060
Medicare Provider Number: 310057

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3564	10.5	9.9	0.8	15.9	15.4	1.0	19.6	19.3	0.9
CONDITIONS:										
Acute Myocardial Infarction	125	25.6	27.5	4.3	31.2	31.4	4.2	35.2	34.5	4.6
Congestive Heart Failure	158	17.1	18.4	3.4	29.1	28.7	3.6	36.1	35.5	3.9
Pneumonia/Influenza	173	26.0	19.0	4.3	35.8	26.3	5.3	39.3	31.1	5.2
Chronic Obstructive Pulmonary Disease	65	16.9	8.2	6.1	18.5	14.5	7.3	24.6	19.4	7.9
Transient Cerebral Ischemia	50	0.0	1.8	-----	0.0	4.1	-----	0.0	6.6	-----
Stroke	147	15.0	21.1	4.5	23.1	28.4	4.4	29.9	32.7	5.1
Hip Fracture	122	9.8	8.0	3.2	15.6	14.4	3.6	18.0	18.9	4.0
Sepsis	30	20.0	31.6	-----	30.0	41.1	-----	43.3	45.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	31	3.2	4.2	-----	9.7	7.5	-----	12.9	10.2	-----
Carotid Endarterectomy	18	0.0	1.4	-----	0.0	2.6	-----	0.0	3.9	-----
Hip Replacement/Reconstruction	75	6.7	4.5	3.0	9.3	8.4	3.3	10.7	11.3	3.7
Open Reduction of Hip Fracture	65	9.2	7.0	4.0	16.9	13.2	5.3	20.0	17.8	5.1
Prostatectomy	102	1.0	1.3	1.5	2.0	3.1	2.7	2.9	5.1	3.8
Cholecystectomy	50	2.0	3.1	-----	10.0	6.0	-----	10.0	8.0	-----
Hysterectomy	20	0.0	1.1	-----	0.0	2.6	-----	5.0	4.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MEMORIAL HOSPITAL-BURLINGTON COUNTY

Medicare Provider Number: 310057

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.7 years
Proportion female	56.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	30.7 %
Transferred from skilled nursing facility	18.1 %
Admitted for elective procedure	16.7 %
Admitted for emergency	34.5 %

COMORBIDITIES:

Cancer	8.2 %
Chronic cardiovascular disease	38.9 %
Chronic liver disease	1.0 %
Chronic renal disease	3.4 %
Chronic pulmonary disease	15.0 %
Cerebrovascular degeneration	7.9 %
Diabetes mellitus	7.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	82.2%
State	14.4%
Outside State	3.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.6 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1989

PROFILE:

Total Beds	402
Occupancy Rate	70.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	29.9 %
Case Mix Index (CMI)	1.2222

STAFFING:

Total Number of Physicians	335
Percent of Physicians Board Certified Specialists	86.0 %
Medical Residents/Interns	14
Registered Nurses	305
Licensed Practical Nurses	50

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

MERCER MEDICAL CENTER

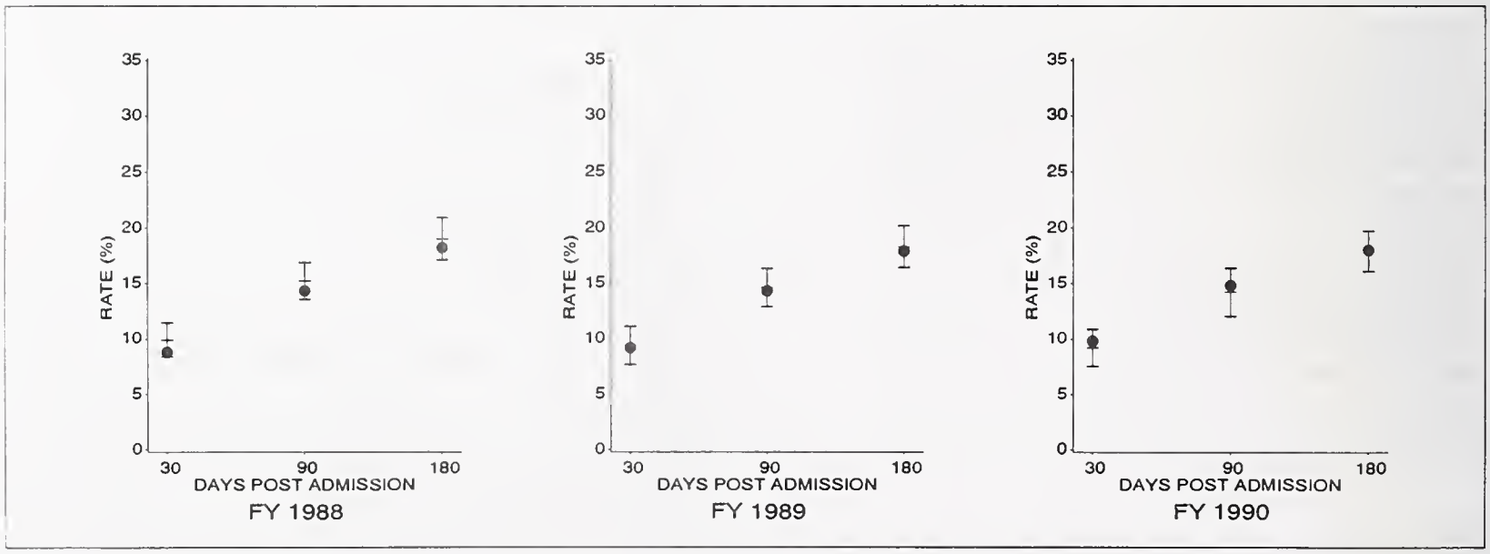
446 BELLEVUE AVE
TRENTON, NJ 08607
Medicare Provider Number: 310044

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2120	9.8	9.2	0.8	14.8	14.2	1.1	18.0	17.9	0.9
CONDITIONS:										
Acute Myocardial Infarction	60	30.0	27.8	7.2	36.7	31.0	8.0	38.3	33.6	7.5
Congestive Heart Failure	109	15.6	13.7	4.4	24.8	21.9	5.2	29.4	27.6	5.6
Pneumonia/Influenza	83	14.5	15.8	5.6	16.9	21.4	8.4	19.3	25.0	9.2
Chronic Obstructive Pulmonary Disease	20	5.0	8.6	-----	15.0	15.8	-----	25.0	21.2	-----
Transient Cerebral Ischemia	46	2.2	1.7	-----	6.5	3.8	-----	8.7	6.2	-----
Stroke	81	25.9	20.9	5.8	35.8	27.3	7.1	38.3	31.0	7.4
Hip Fracture	40	12.5	7.6	-----	15.0	13.0	-----	17.5	16.4	-----
Sepsis	21	14.3	21.8	-----	28.6	28.4	-----	38.1	32.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	8	0.0	6.3	-----	0.0	11.1	-----	0.0	14.4	-----
Carotid Endarterectomy	12	0.0	1.8	-----	0.0	3.3	-----	0.0	4.7	-----
Hip Replacement/Reconstruction	27	11.1	2.9	-----	11.1	5.6	-----	11.1	7.7	-----
Open Reduction of Hip Fracture	25	8.0	7.9	-----	12.0	13.8	-----	16.0	17.5	-----
Prostatectomy	77	0.0	0.9	2.5	1.3	2.1	3.3	2.6	3.6	4.1
Cholecystectomy	51	2.0	4.5	3.5	2.0	8.1	4.9	2.0	10.6	6.1
Hysterectomy	28	0.0	1.2	-----	0.0	2.7	-----	3.6	4.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MERCER MEDICAL CENTER
Medicare Provider Number: 310044

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.1 years
Proportion female	55.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	38.8 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	23.0 %
Admitted for emergency	74.9 %

COMORBIDITIES:

Cancer	10.8 %
Chronic cardiovascular disease	36.9 %
Chronic liver disease	1.2 %
Chronic renal disease	1.5 %
Chronic pulmonary disease	15.4 %
Cerebrovascular degeneration	5.2 %
Diabetes mellitus	12.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	73.1%
State	9.2%
Outside State	17.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.8 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	299
Occupancy Rate	80.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	25.8 %
Case Mix Index (CMI)	1.2420

STAFFING:

Total Number of Physicians	152
Percent of Physicians Board Certified Specialists	81.6 %
Medical Residents/Interns	0
Registered Nurses	266
Licensed Practical Nurses	67

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

Not used in calculating mortality rates

MONMOUTH MEDICAL CENTER

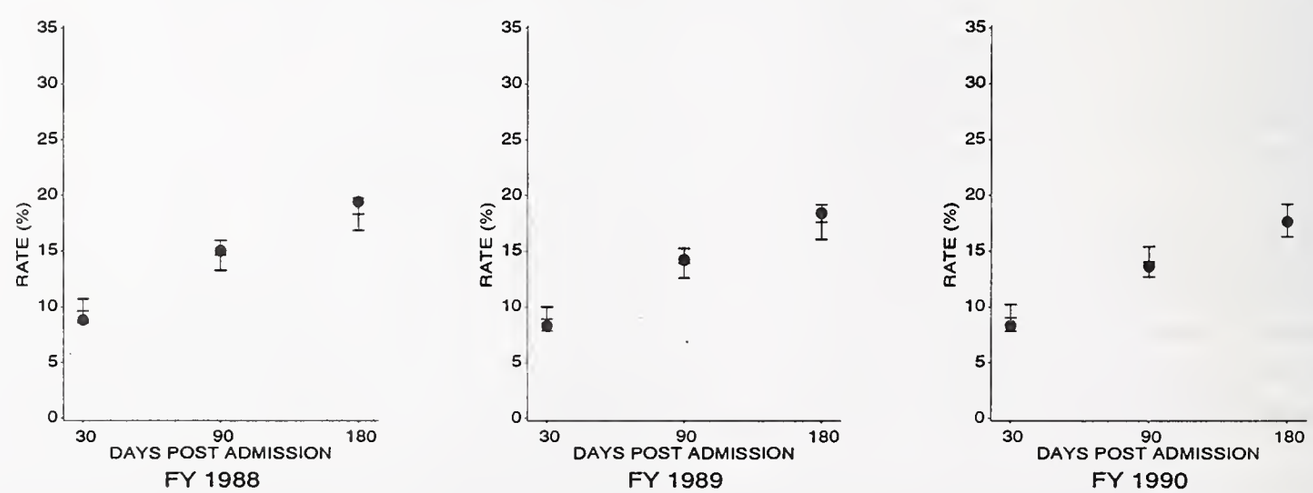
300 2ND AVE
LONG BRANCH, NJ 07740
Medicare Provider Number: 310075

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2937	8.3	9.0	0.6	13.6	14.0	0.7	17.6	17.7	0.7
CONDITIONS:										
Acute Myocardial Infarction	82	29.3	30.4	5.8	32.9	33.8	5.3	39.0	36.7	5.5
Congestive Heart Failure	143	14.7	14.7	3.0	23.8	23.1	3.8	28.7	29.1	4.8
Pneumonia/Influenza	113	20.4	18.7	4.9	28.3	26.1	4.5	34.5	30.8	5.3
Chronic Obstructive Pulmonary Disease	44	2.3	9.0	-----	9.1	15.8	-----	15.9	20.9	-----
Transient Cerebral Ischemia	39	0.0	1.9	-----	5.1	4.2	-----	7.7	6.7	-----
Stroke	99	17.2	18.7	4.2	25.3	25.3	4.4	28.3	29.0	4.6
Hip Fracture	68	8.8	6.8	3.5	13.2	12.2	7.2	23.5	15.9	8.6
Sepsis	52	21.2	26.6	9.6	30.8	34.4	8.1	36.5	39.6	9.8
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	34	0.0	3.1	-----	2.9	6.7	-----	8.8	10.2	-----
Carotid Endarterectomy	11	0.0	1.8	-----	0.0	3.1	-----	0.0	4.7	-----
Hip Replacement/Reconstruction	43	0.0	2.8	-----	2.3	5.1	-----	7.0	6.8	-----
Open Reduction of Hip Fracture	37	5.4	5.7	-----	8.1	10.2	-----	16.2	13.6	-----
Prostatectomy	60	0.0	1.0	1.5	3.3	2.3	3.1	3.3	3.9	3.6
Cholecystectomy	57	0.0	1.9	2.4	3.5	3.6	3.0	5.3	5.0	3.2
Hysterectomy	21	0.0	0.2	-----	0.0	0.5	-----	0.0	0.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MONMOUTH MEDICAL CENTER
Medicare Provider Number: 310075

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.6 years
Proportion female	58.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	26.6 %
Transferred from skilled nursing facility	5.4 %
Admitted for elective procedure	21.6 %
Admitted for emergency	12.6 %

COMORBIDITIES:

Cancer	8.3 %
Chronic cardiovascular disease	38.0 %
Chronic liver disease	1.1 %
Chronic renal disease	6.0 %
Chronic pulmonary disease	11.6 %
Cerebrovascular degeneration	5.3 %
Diabetes mellitus	10.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	87.5%
State	8.7%
Outside State	3.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	13.6 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	463
Occupancy Rate	77.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	30.2 %
Case Mix Index (CMI)	1.2458

STAFFING:

Total Number of Physicians	429
Percent of Physicians Board Certified Specialists	62.7 %
Medical Residents/Interns	116
Registered Nurses	457
Licensed Practical Nurses	146

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

MONTCLAIR COMMUNITY HOSPITAL

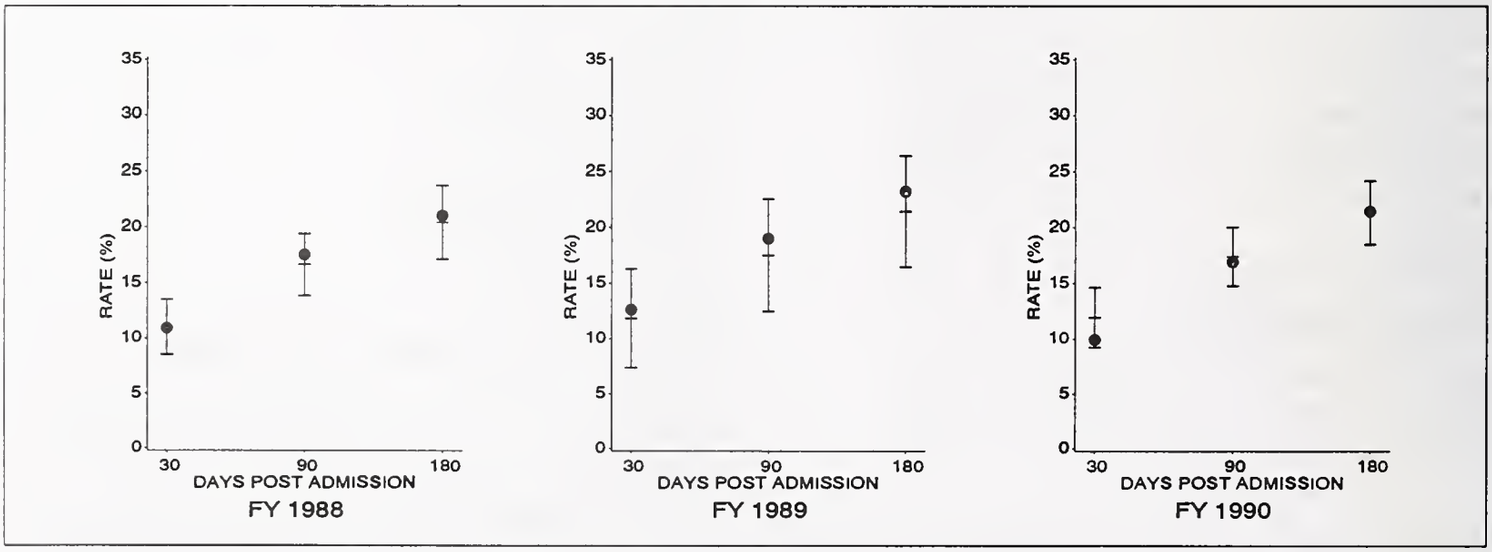
120 HARRISON AVE
MONTCLAIR, NJ 07042
Medicare Provider Number: 310043

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	838	9.9	11.9	1.4	16.9	17.4	1.3	21.4	21.3	1.4
CONDITIONS:										
Acute Myocardial Infarction	25	32.0	33.5	-----	40.0	36.9	-----	48.0	40.0	-----
Congestive Heart Failure	43	11.6	15.4	-----	27.9	23.6	-----	39.5	29.7	-----
Pneumonia/Influenza	57	8.8	18.7	7.4	19.3	25.5	7.5	24.6	29.6	6.6
Chronic Obstructive Pulmonary Disease	9	11.1	6.4	-----	11.1	11.3	-----	11.1	14.7	-----
Transient Cerebral Ischemia	10	10.0	7.3	-----	20.0	15.3	-----	30.0	22.8	-----
Stroke	33	15.2	20.2	-----	15.2	27.9	-----	21.2	31.7	-----
Hip Fracture	42	4.8	7.4	-----	9.5	12.8	-----	9.5	16.5	-----
Sepsis	16	31.3	26.7	-----	31.3	35.2	-----	31.3	40.2	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	9	0.0	4.1	-----	0.0	8.4	-----	0.0	12.1	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	16	6.3	5.2	-----	6.3	9.1	-----	6.3	12.0	-----
Open Reduction of Hip Fracture	21	4.8	7.2	-----	9.5	12.9	-----	9.5	16.9	-----
Prostatectomy	28	0.0	1.3	-----	0.0	3.0	-----	0.0	5.1	-----
Cholecystectomy	15	0.0	1.4	-----	0.0	2.3	-----	6.7	2.9	-----
Hysterectomy	2	0.0	0.3	-----	0.0	0.7	-----	0.0	1.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MONTCLAIR COMMUNITY HOSPITAL
Medicare Provider Number: 310043

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	78.8 years
Proportion female	63.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	9.8 %
Transferred from skilled nursing facility	2.6 %
Admitted for elective procedure	3.8 %
Admitted for emergency	75.5 %

COMORBIDITIES:

Cancer	7.2 %
Chronic cardiovascular disease	36.9 %
Chronic liver disease	1.1 %
Chronic renal disease	2.7 %
Chronic pulmonary disease	11.6 %
Cerebrovascular degeneration	2.4 %
Diabetes mellitus	7.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	83.5%
State	13.3%
Outside State	3.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.1 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	100
Occupancy Rate	56.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	37.1 %
Case Mix Index (CMI)	1.2316

STAFFING:

Total Number of Physicians	339
Percent of Physicians Board Certified Specialists	61.1 %
Medical Residents/Interns	0
Registered Nurses	57
Licensed Practical Nurses	22

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

MORRISTOWN MEMORIAL HOSPITAL

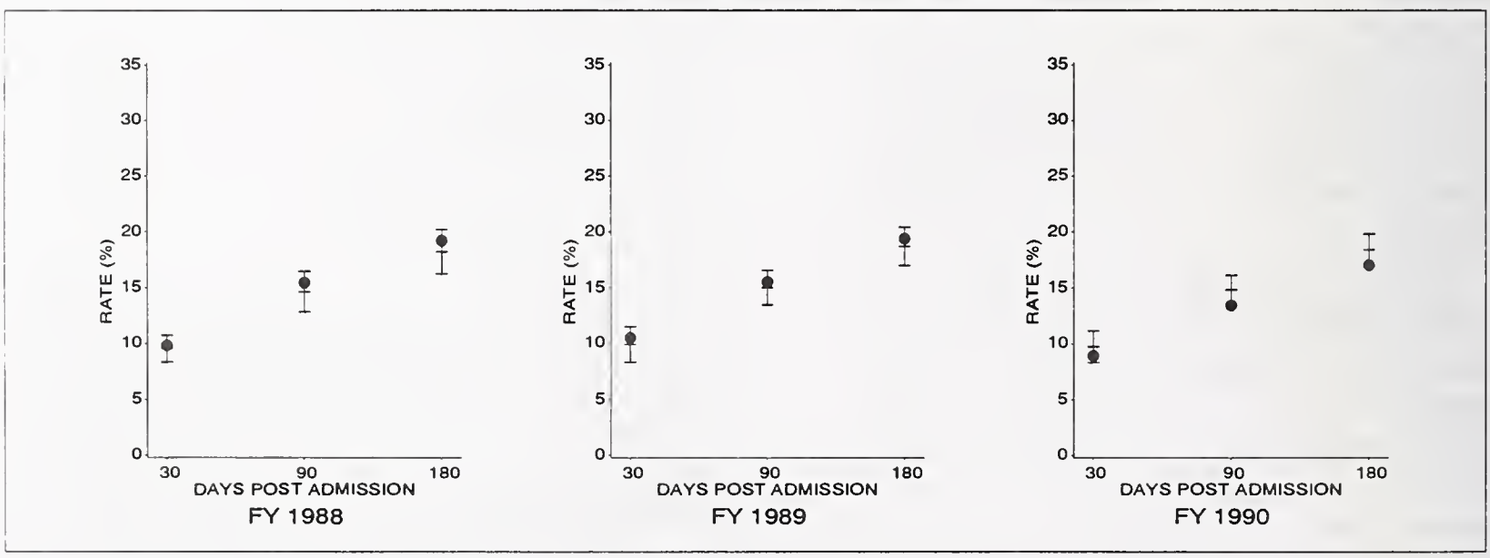
100 MADISON AVE
MORRISTOWN, NJ 07960
Medicare Provider Number: 310015

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	4079	8.9	9.7	0.7	13.4	14.8	0.7	17.0	18.4	0.7
CONDITIONS:										
Acute Myocardial Infarction	126	27.8	29.7	4.9	31.7	32.9	4.3	36.5	35.6	4.5
Congestive Heart Failure	189	14.3	15.1	3.6	23.3	24.1	3.2	32.3	30.4	3.7
Pneumonia/Influenza	154	16.2	19.2	4.5	24.0	26.1	5.8	27.9	30.3	6.8
Chronic Obstructive Pulmonary Disease	42	19.0	9.8	-----	21.4	17.2	-----	26.2	22.3	-----
Transient Cerebral Ischemia	47	0.0	1.6	-----	0.0	3.4	-----	0.0	5.2	-----
Stroke	110	18.2	22.1	5.3	25.5	28.6	5.2	29.1	32.3	5.3
Hip Fracture	133	7.5	6.4	2.3	10.5	11.5	3.5	18.0	15.1	4.3
Sepsis	41	34.1	32.2	-----	46.3	41.2	-----	51.2	46.4	-----
PROCEDURES:										
Angioplasty	89	2.2	2.5	2.0	2.2	3.5	2.2	5.6	4.6	2.4
Coronary Artery Bypass Graft	127	6.3	5.8	2.1	7.9	9.0	2.8	8.7	10.4	3.3
Initial Pacemaker Insertion	41	0.0	2.3	-----	4.9	4.8	-----	4.9	7.1	-----
Carotid Endarterectomy	10	10.0	1.8	-----	20.0	3.5	-----	20.0	5.4	-----
Hip Replacement/Reconstruction	96	2.1	3.1	2.4	3.1	5.8	4.0	4.2	7.8	4.8
Open Reduction of Hip Fracture	77	6.5	6.2	3.3	7.8	11.5	5.0	19.5	15.3	5.2
Prostatectomy	154	0.0	0.9	1.1	0.6	2.1	1.8	1.9	3.5	2.4
Cholecystectomy	60	0.0	4.1	3.5	3.3	7.7	4.3	10.0	10.1	4.9
Hysterectomy	43	4.7	1.1	-----	4.7	2.5	-----	4.7	3.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MORRISTOWN MEMORIAL HOSPITAL
Medicare Provider Number: 310015

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.0 years
Proportion female	55.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	40.7 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	23.1 %
Admitted for emergency	71.1 %

COMORBIDITIES:

Cancer	9.4 %
Chronic cardiovascular disease	37.1 %
Chronic liver disease	1.2 %
Chronic renal disease	5.1 %
Chronic pulmonary disease	9.7 %
Cerebrovascular degeneration	3.6 %
Diabetes mellitus	6.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	65.5%
State	28.7%
Outside State	5.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.3 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1989

PROFILE:

Total Beds	545
Occupancy Rate	82.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	28.1 %
Case Mix Index (CMI)	1.5090

STAFFING:

Total Number of Physicians	506
Percent of Physicians Board Certified Specialists	73.9 %
Medical Residents/Interns	96
Registered Nurses	400
Licensed Practical Nurses	94

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

MOUNTAINSIDE HOSPITAL

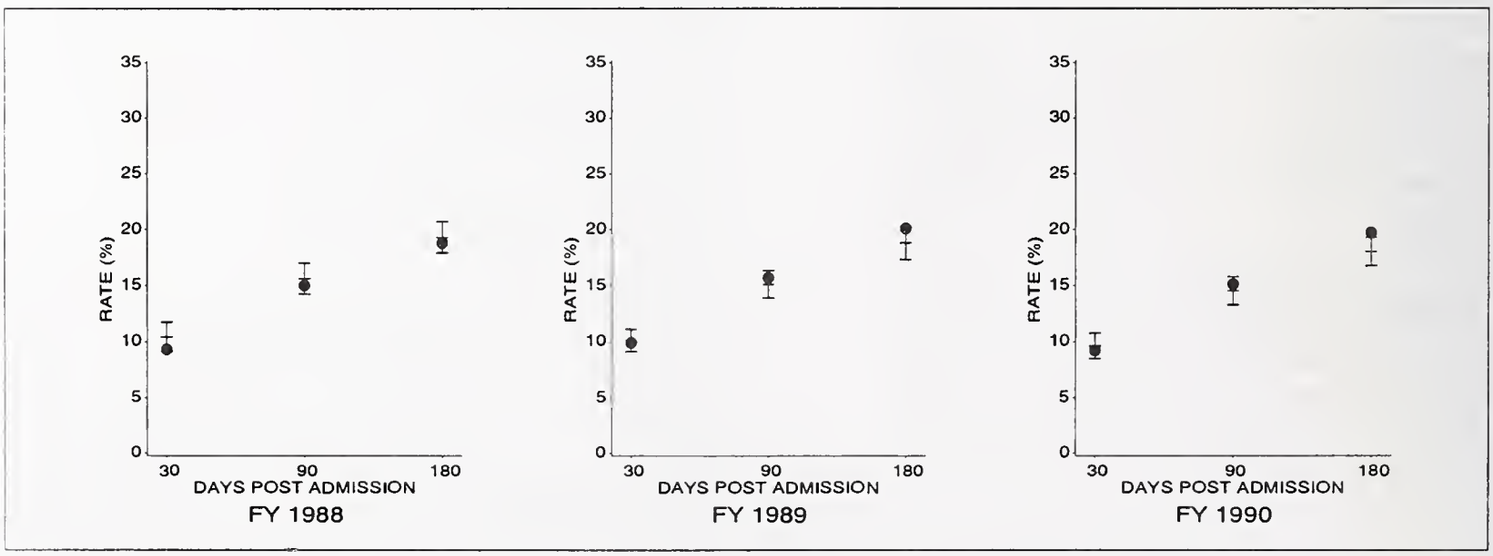
BAY HIGHLAND AVES
MONTCLAIR, NJ 07042
Medicare Provider Number: 310054

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3870	9.2	9.6	0.6	15.1	14.5	0.6	19.7	18.0	0.6
CONDITIONS:										
Acute Myocardial Infarction	148	29.7	30.4	3.8	35.1	33.5	4.1	38.5	36.3	4.3
Congestive Heart Failure	198	13.6	14.6	2.8	21.7	22.9	3.8	31.8	29.0	4.1
Pneumonia/Influenza	158	15.2	16.7	3.2	22.8	22.8	3.4	26.6	26.7	3.5
Chronic Obstructive Pulmonary Disease	34	11.8	11.1	-----	17.6	18.4	-----	26.5	23.8	-----
Transient Cerebral Ischemia	71	0.0	2.1	3.0	4.2	4.7	3.1	7.0	7.4	4.4
Stroke	139	20.1	22.8	5.2	28.1	29.6	4.2	31.7	33.4	4.2
Hip Fracture	122	5.7	7.5	4.5	11.5	13.2	4.9	13.1	16.9	5.0
Sepsis	51	27.5	30.2	6.6	41.2	39.1	7.6	51.0	44.0	7.9
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	36	2.8	4.3	-----	16.7	7.8	-----	22.2	10.9	-----
Carotid Endarterectomy	18	0.0	1.4	-----	0.0	2.5	-----	0.0	3.6	-----
Hip Replacement/Reconstruction	97	0.0	3.0	2.4	1.0	5.5	3.5	2.1	7.4	4.0
Open Reduction of Hip Fracture	61	8.2	8.4	3.7	16.4	15.2	4.7	18.0	19.5	5.2
Prostatectomy	165	0.6	1.2	1.0	3.0	2.9	1.7	4.8	4.8	2.2
Cholecystectomy	34	2.9	2.5	-----	5.9	4.2	-----	8.8	5.4	-----
Hysterectomy	32	3.1	1.0	-----	6.3	2.2	-----	18.8	3.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MOUNTAINSIDE HOSPITAL
Medicare Provider Number: 310054

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.6 years
Proportion female	58.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	39.5 %
Transferred from skilled nursing facility	3.5 %
Admitted for elective procedure	22.1 %
Admitted for emergency	75.4 %

COMORBIDITIES:

Cancer	9.0 %
Chronic cardiovascular disease	38.1 %
Chronic liver disease	1.1 %
Chronic renal disease	2.4 %
Chronic pulmonary disease	10.2 %
Cerebrovascular degeneration	3.2 %
Diabetes mellitus	6.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	81.4%
State	15.7%
Outside State	2.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.4 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	366
Occupancy Rate	83.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.2696

STAFFING:

Total Number of Physicians	265
Percent of Physicians Board Certified Specialists	78.9 %
Medical Residents/Interns	44
Registered Nurses	206
Licensed Practical Nurses	17

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

MUHLENBERG HOSPITAL

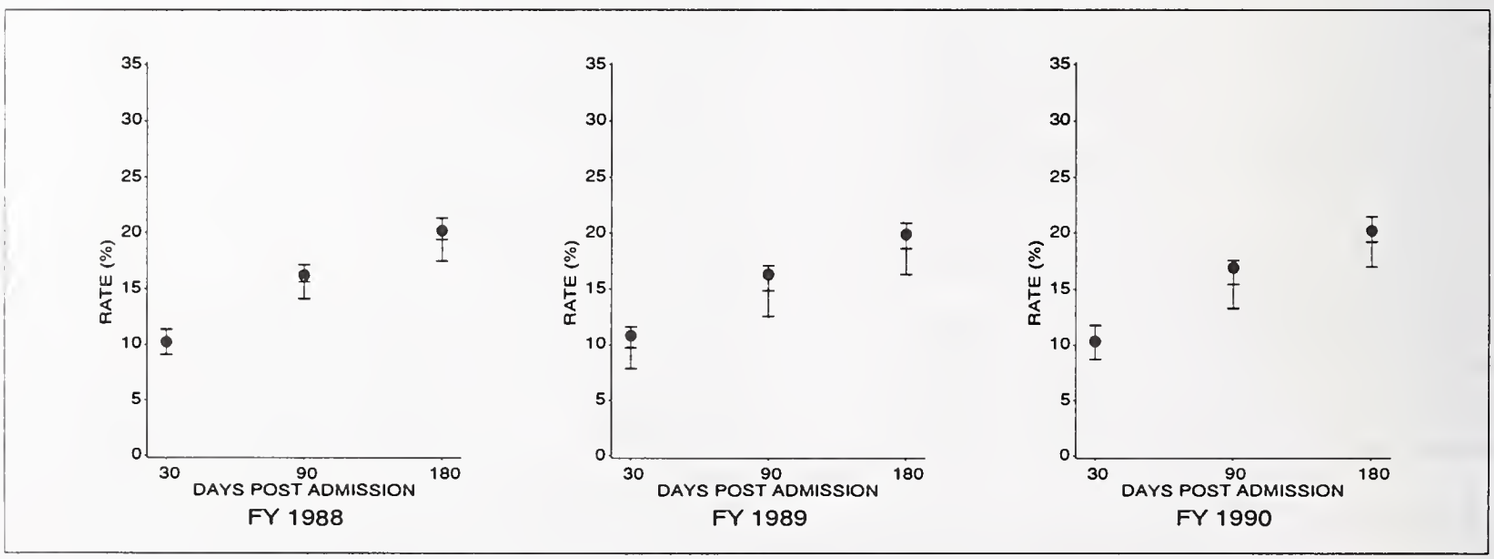
PARK AVE & RANDOLPH RD
PLAINFIELD, NJ 07060
Medicare Provider Number: 310063

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2929	10.3	10.2	0.8	16.9	15.4	1.1	20.2	19.2	1.1
CONDITIONS:										
Acute Myocardial Infarction	79	32.9	28.8	7.5	35.4	31.5	8.4	36.7	34.0	8.1
Congestive Heart Failure	151	10.6	14.4	3.3	21.2	22.7	3.5	29.8	28.4	3.9
Pneumonia/Influenza	96	20.8	18.9	4.9	32.3	25.2	6.7	37.5	29.4	7.6
Chronic Obstructive Pulmonary Disease	33	12.1	9.0	-----	15.2	15.4	-----	18.2	20.0	-----
Transient Cerebral Ischemia	57	1.8	1.8	1.9	5.3	4.0	3.0	8.8	6.5	4.3
Stroke	141	26.2	22.0	5.5	35.5	29.4	6.8	39.0	33.5	6.3
Hip Fracture	62	1.6	7.1	5.7	9.7	12.6	7.3	12.9	16.2	5.9
Sepsis	33	39.4	32.8	-----	42.4	41.3	-----	42.4	45.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	26	0.0	3.5	-----	3.8	7.0	-----	11.5	10.3	-----
Carotid Endarterectomy	22	0.0	1.4	-----	4.5	2.6	-----	4.5	3.9	-----
Hip Replacement/Reconstruction	49	2.0	2.9	-----	4.1	5.5	-----	6.1	7.4	-----
Open Reduction of Hip Fracture	38	0.0	7.0	-----	10.5	12.4	-----	13.2	16.1	-----
Prostatectomy	101	2.0	1.5	1.5	5.9	3.5	2.8	9.9	5.7	4.2
Cholecystectomy	50	2.0	2.4	-----	2.0	4.0	-----	2.0	5.3	-----
Hysterectomy	33	0.0	0.7	-----	0.0	1.6	-----	0.0	2.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MUHLENBERG HOSPITAL
Medicare Provider Number: 310063

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.2 years
Proportion female	58.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	30.9 %
Transferred from skilled nursing facility	6.4 %
Admitted for elective procedure	18.0 %
Admitted for emergency	68.1 %

COMORBIDITIES:

Cancer	9.5 %
Chronic cardiovascular disease	36.6 %
Chronic liver disease	1.0 %
Chronic renal disease	5.0 %
Chronic pulmonary disease	10.9 %
Cerebrovascular degeneration	4.4 %
Diabetes mellitus	8.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	51.7%
State	46.0%
Outside State	2.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.5 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	385
Occupancy Rate	78.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	33.9 %
Case Mix Index (CMI)	1.2982

STAFFING:

Total Number of Physicians	285
Percent of Physicians Board Certified Specialists	73.3 %
Medical Residents/Interns	31
Registered Nurses	309
Licensed Practical Nurses	41

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

NEWARK BETH ISRAEL MEDICAL CENTER

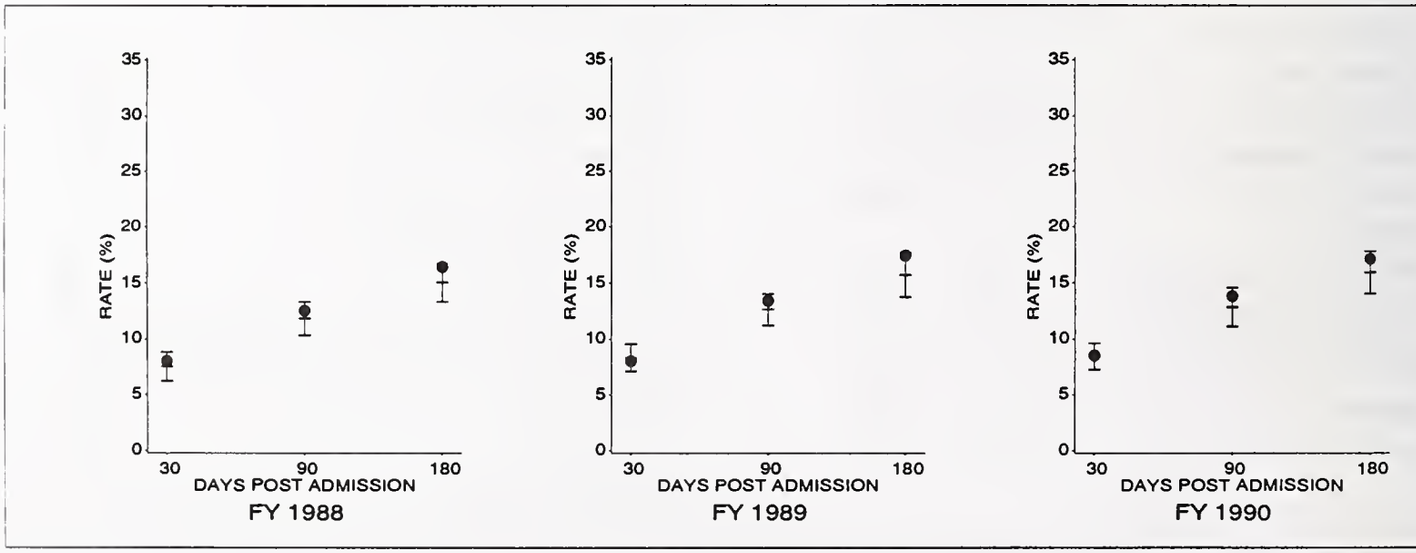
201 LYONS AVE
NEWARK, NJ 07112
Medicare Provider Number: 310002

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2482	8.5	8.4	0.6	13.8	12.8	0.9	17.1	15.9	0.9
CONDITIONS:										
Acute Myocardial Infarction	62	24.2	22.0	5.8	27.4	24.8	5.7	27.4	27.4	5.7
Congestive Heart Failure	126	15.9	15.2	3.2	24.6	24.4	3.8	27.8	30.7	4.6
Pneumonia/Influenza	50	14.0	17.6	-----	20.0	24.1	-----	22.0	28.3	-----
Chronic Obstructive Pulmonary Disease	25	8.0	12.4	-----	20.0	20.8	-----	32.0	26.1	-----
Transient Cerebral Ischemia	18	11.1	1.4	-----	16.7	3.2	-----	16.7	5.2	-----
Stroke	65	23.1	22.5	5.4	33.8	29.1	7.2	36.9	33.1	6.8
Hip Fracture	13	23.1	6.8	-----	38.5	12.7	-----	38.5	16.7	-----
Sepsis	25	28.0	31.2	-----	32.0	39.8	-----	40.0	44.8	-----
PROCEDURES:										
Angioplasty	110	0.9	2.1	1.5	1.8	3.0	1.8	1.8	3.8	3.2
Coronary Artery Bypass Graft	160	8.7	6.4	2.3	15.0	9.4	3.3	16.9	10.8	3.5
Initial Pacemaker Insertion	34	0.0	2.4	-----	0.0	4.7	-----	0.0	6.8	-----
Carotid Endarterectomy	2	0.0	1.5	-----	0.0	2.6	-----	0.0	3.6	-----
Hip Replacement/Reconstruction	22	9.1	3.3	-----	22.7	6.5	-----	22.7	9.0	-----
Open Reduction of Hip Fracture	4	50.0	3.9	-----	50.0	7.7	-----	50.0	10.8	-----
Prostatectomy	42	0.0	1.8	-----	2.4	4.0	-----	4.8	6.4	-----
Cholecystectomy	10	10.0	7.8	-----	20.0	15.1	-----	20.0	19.8	-----
Hysterectomy	4	0.0	0.2	-----	0.0	0.4	-----	0.0	0.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



NEWARK BETH ISRAEL MEDICAL CENTER

Medicare Provider Number: 310002

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	67.8 years
Proportion female	48.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	32.0 %
Transferred from skilled nursing facility	1.1 %
Admitted for elective procedure	27.2 %
Admitted for emergency	70.5 %

COMORBIDITIES:

Cancer	5.7 %
Chronic cardiovascular disease	42.4 %
Chronic liver disease	0.9 %
Chronic renal disease	12.6 %
Chronic pulmonary disease	7.8 %
Cerebrovascular degeneration	2.4 %
Diabetes mellitus	11.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	55.0%
State	40.3%
Outside State	4.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	13.0 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	545
Occupancy Rate	84.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	21.9 %
Case Mix Index (CMI)	1.6787

STAFFING:

Total Number of Physicians	641
Percent of Physicians Board Certified Specialists	79.9 %
Medical Residents/Interns	79
Registered Nurses	635
Licensed Practical Nurses	86

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

NEWCOMB MEDICAL CENTER

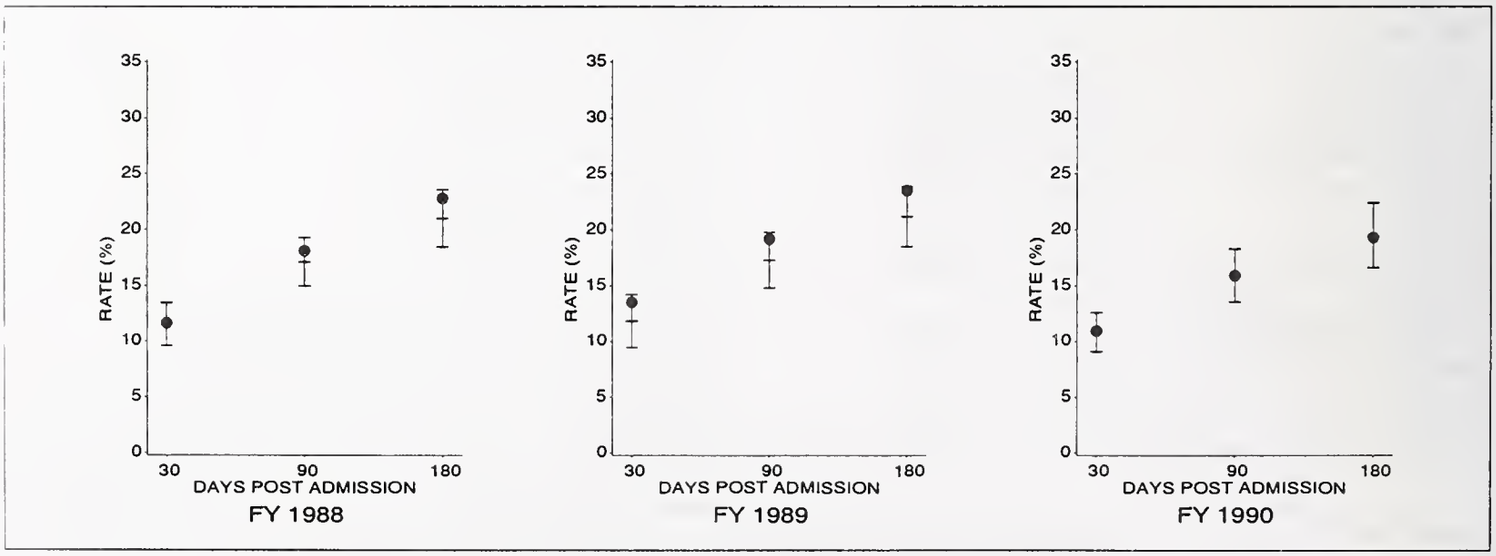
66 S STATE ST
VINELAND, NJ 08360
Medicare Provider Number: 310087

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1556	10.9	10.8	0.9	15.9	15.9	1.2	19.3	19.5	1.5
CONDITIONS:										
Acute Myocardial Infarction	68	29.4	28.8	6.3	33.8	31.6	7.6	41.2	34.2	8.0
Congestive Heart Failure	94	13.8	14.8	5.0	19.1	23.3	6.5	25.5	29.6	8.6
Pneumonia/Influenza	58	25.9	18.4	6.1	31.0	24.9	6.4	31.0	29.2	6.1
Chronic Obstructive Pulmonary Disease	18	0.0	7.7	-----	5.6	13.2	-----	5.6	17.4	-----
Transient Cerebral Ischemia	27	7.4	2.3	-----	14.8	5.1	-----	14.8	8.1	-----
Stroke	58	20.7	20.6	5.5	31.0	27.8	6.8	34.5	31.7	6.6
Hip Fracture	50	8.0	5.2	-----	10.0	9.5	-----	10.0	12.5	-----
Sepsis	27	25.9	31.2	-----	37.0	41.3	-----	48.1	46.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	28	0.0	3.4	-----	3.6	5.8	-----	7.1	7.8	-----
Carotid Endarterectomy	4	0.0	1.2	-----	0.0	2.4	-----	0.0	3.7	-----
Hip Replacement/Reconstruction	21	0.0	3.5	-----	0.0	6.6	-----	0.0	8.8	-----
Open Reduction of Hip Fracture	31	6.5	5.0	-----	9.7	9.4	-----	9.7	12.4	-----
Prostatectomy	33	0.0	0.6	-----	3.0	1.4	-----	3.0	2.4	-----
Cholecystectomy	27	0.0	1.9	-----	0.0	3.2	-----	0.0	4.1	-----
Hysterectomy	6	0.0	1.5	-----	0.0	3.2	-----	0.0	4.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



NEWCOMB MEDICAL CENTER

Medicare Provider Number: 310087

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.0 years
Proportion female	55.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	26.5 %
Transferred from skilled nursing facility	9.8 %
Admitted for elective procedure	15.0 %
Admitted for emergency	82.6 %

COMORBIDITIES:

Cancer	7.0 %
Chronic cardiovascular disease	33.2 %
Chronic liver disease	0.7 %
Chronic renal disease	1.9 %
Chronic pulmonary disease	9.4 %
Cerebrovascular degeneration	5.4 %
Diabetes mellitus	8.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	76.6%
State	21.3%
Outside State	2.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.9 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	243
Occupancy Rate	61.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	31.4 %
Case Mix Index (CMI)	1.1757

STAFFING:

Total Number of Physicians	106
Percent of Physicians Board Certified Specialists	73.6 %
Medical Residents/Interns	0
Registered Nurses	175
Licensed Practical Nurses	83

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

NEWTON MEMORIAL HOSPITAL

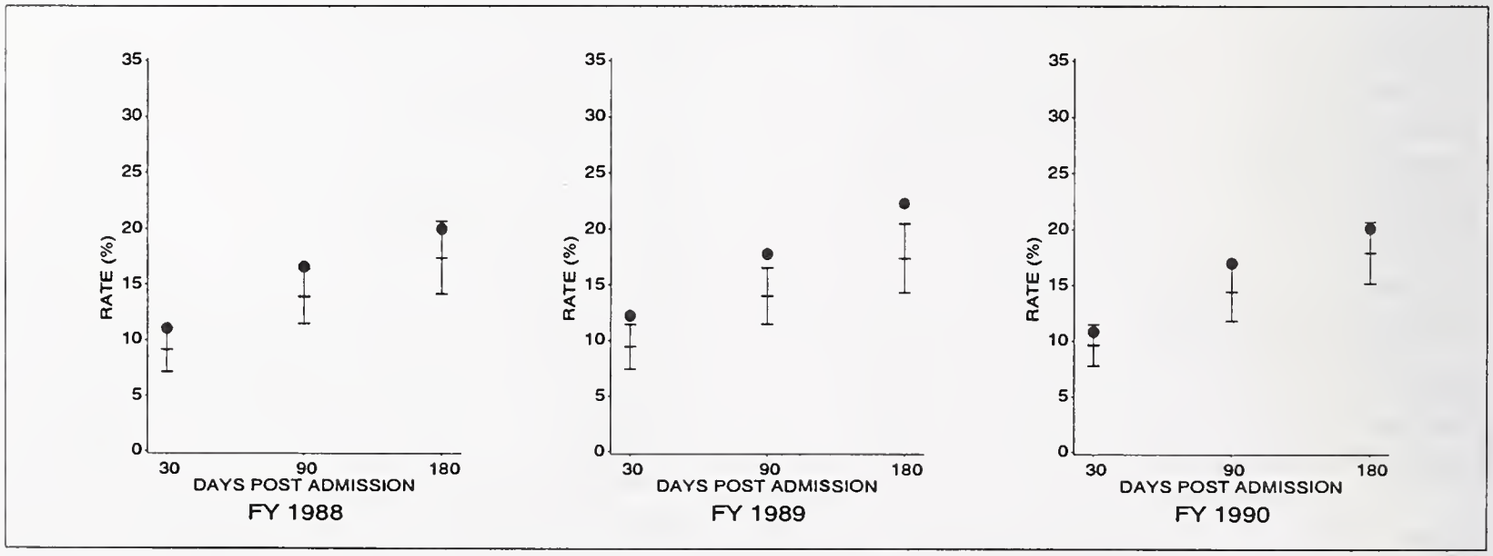
175 HIGH ST
NEWTON, NJ 07860
Medicare Provider Number: 310028

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1332	10.8	9.6	0.9	17.0	14.4	1.3	20.1	17.9	1.4
CONDITIONS:										
Acute Myocardial Infarction	52	32.7	28.2	8.6	38.5	31.8	9.5	40.4	34.6	7.7
Congestive Heart Failure	64	18.8	14.2	5.9	21.9	22.3	5.2	29.7	28.1	5.9
Pneumonia/Influenza	85	20.0	14.8	5.4	30.6	20.5	7.5	34.1	24.5	7.9
Chronic Obstructive Pulmonary Disease	23	0.0	9.0	-----	21.7	15.9	-----	26.1	21.3	-----
Transient Cerebral Ischemia	30	0.0	1.5	-----	6.7	3.5	-----	10.0	5.8	-----
Stroke	67	20.9	20.8	7.6	38.8	27.9	7.9	43.3	32.0	8.6
Hip Fracture	46	8.7	5.7	-----	8.7	10.1	-----	13.0	13.1	-----
Sepsis	14	21.4	16.5	-----	28.6	20.7	-----	28.6	23.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	12	0.0	3.1	-----	8.3	5.8	-----	16.7	8.0	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	30	3.3	3.2	-----	3.3	6.1	-----	3.3	8.4	-----
Open Reduction of Hip Fracture	23	8.7	5.5	-----	8.7	10.0	-----	17.4	13.2	-----
Prostatectomy	22	0.0	0.9	-----	0.0	2.2	-----	4.5	3.8	-----
Cholecystectomy	19	0.0	1.7	-----	0.0	3.1	-----	0.0	4.0	-----
Hysterectomy	11	0.0	0.6	-----	0.0	1.5	-----	9.1	2.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



NEWTON MEMORIAL HOSPITAL

Medicare Provider Number: 310028

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	76.6 years
Proportion female	61.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	33.0 %
Transferred from skilled nursing facility	1.4 %
Admitted for elective procedure	16.1 %
Admitted for emergency	20.0 %

COMORBIDITIES:

Cancer	6.8 %
Chronic cardiovascular disease	37.0 %
Chronic liver disease	0.6 %
Chronic renal disease	2.1 %
Chronic pulmonary disease	14.2 %
Cerebrovascular degeneration	4.2 %
Diabetes mellitus	7.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	76.9%
State	17.6%
Outside State	5.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.1 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	165
Occupancy Rate	70.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	27.2 %
Case Mix Index (CMI)	1.1561

STAFFING:

Total Number of Physicians	127
Percent of Physicians Board Certified Specialists	63.8 %
Medical Residents/Interns	0
Registered Nurses	95
Licensed Practical Nurses	37

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

OUR LADY OF LOURDES MEDICAL CENTER

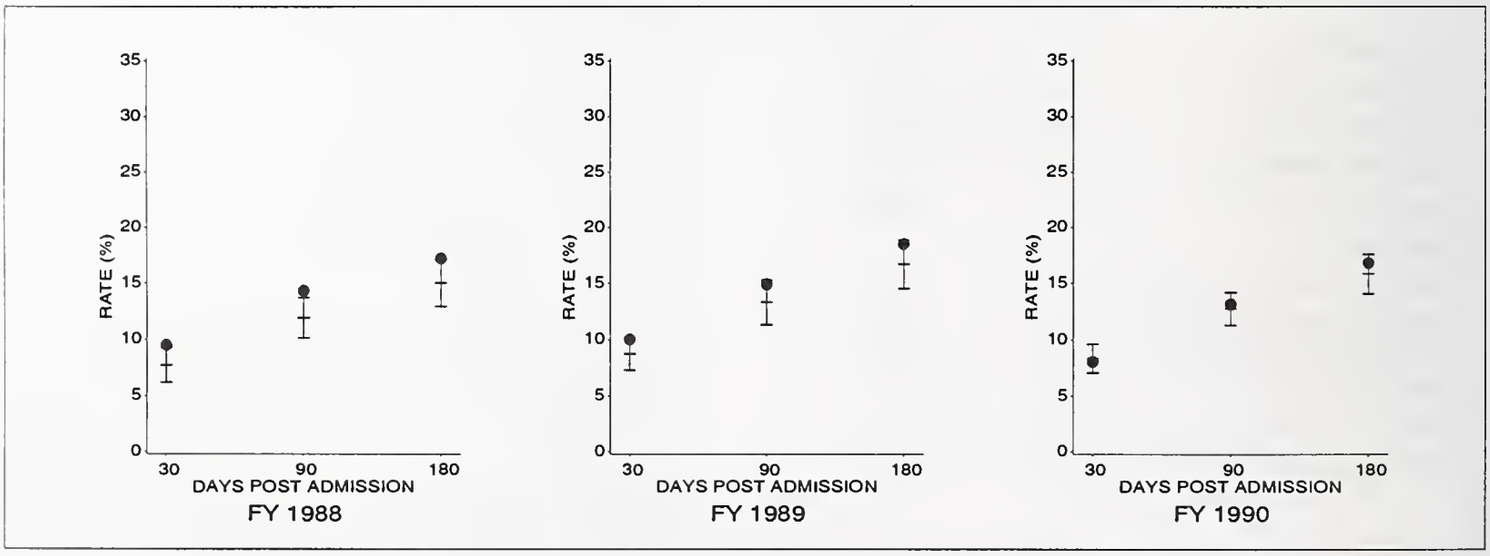
1600 HADDON AVENUE
CAMDEN, NJ 08103
Medicare Provider Number: 310029

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2526	8.0	8.3	0.6	13.1	12.7	0.7	16.8	15.8	0.9
CONDITIONS:										
Acute Myocardial Infarction	119	30.3	24.5	5.3	32.8	27.4	6.0	37.8	29.9	6.4
Congestive Heart Failure	122	9.0	14.3	4.1	25.4	22.9	4.3	31.1	29.2	4.2
Pneumonia/Influenza	53	9.4	15.0	7.1	17.0	20.5	7.1	18.9	24.0	7.7
Chronic Obstructive Pulmonary Disease	18	5.6	8.7	-----	16.7	14.7	-----	22.2	18.9	-----
Transient Cerebral Ischemia	46	0.0	2.0	-----	2.2	4.4	-----	4.3	6.9	-----
Stroke	80	20.0	18.4	7.7	25.0	25.6	6.2	33.7	29.4	6.4
Hip Fracture	27	14.8	5.4	-----	18.5	9.5	-----	29.6	12.4	-----
Sepsis	24	20.8	24.8	-----	25.0	34.1	-----	29.2	38.4	-----
PROCEDURES:										
Angioplasty	49	0.0	2.1	-----	2.0	3.0	-----	2.0	3.8	-----
Coronary Artery Bypass Graft	198	7.6	6.2	2.1	9.6	9.0	2.1	10.6	10.2	2.2
Initial Pacemaker Insertion	16	6.3	2.6	-----	12.5	5.0	-----	12.5	7.1	-----
Carotid Endarterectomy	2	0.0	0.9	-----	0.0	1.9	-----	0.0	2.7	-----
Hip Replacement/Reconstruction	18	5.6	3.0	-----	11.1	5.7	-----	11.1	7.5	-----
Open Reduction of Hip Fracture	12	8.3	5.2	-----	8.3	9.7	-----	33.3	12.9	-----
Prostatectomy	78	1.3	1.4	1.6	5.1	3.2	2.6	6.4	5.3	3.2
Cholecystectomy	29	3.4	3.4	-----	6.9	5.9	-----	10.3	7.3	-----
Hysterectomy	12	0.0	0.5	-----	0.0	1.1	-----	0.0	1.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



OUR LADY OF LOURDES MEDICAL CENTER

Medicare Provider Number: 310029

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	71.7 years
Proportion female	51.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	37.9 %
Transferred from skilled nursing facility	0.4 %
Admitted for elective procedure	32.4 %
Admitted for emergency	52.1 %

COMORBIDITIES:

Cancer	5.1 %
Chronic cardiovascular disease	46.8 %
Chronic liver disease	0.7 %
Chronic renal disease	10.1 %
Chronic pulmonary disease	12.7 %
Cerebrovascular degeneration	3.6 %
Diabetes mellitus	10.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	69.3%
State	27.9%
Outside State	2.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	12.3 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	366
Occupancy Rate	88.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	38.2 %
Case Mix Index (CMI)	1.7241

STAFFING:

Total Number of Physicians	234
Percent of Physicians Board Certified Specialists	79.1 %
Medical Residents/Interns	14
Registered Nurses	580
Licensed Practical Nurses	81

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

OVERLOOK HOSPITAL

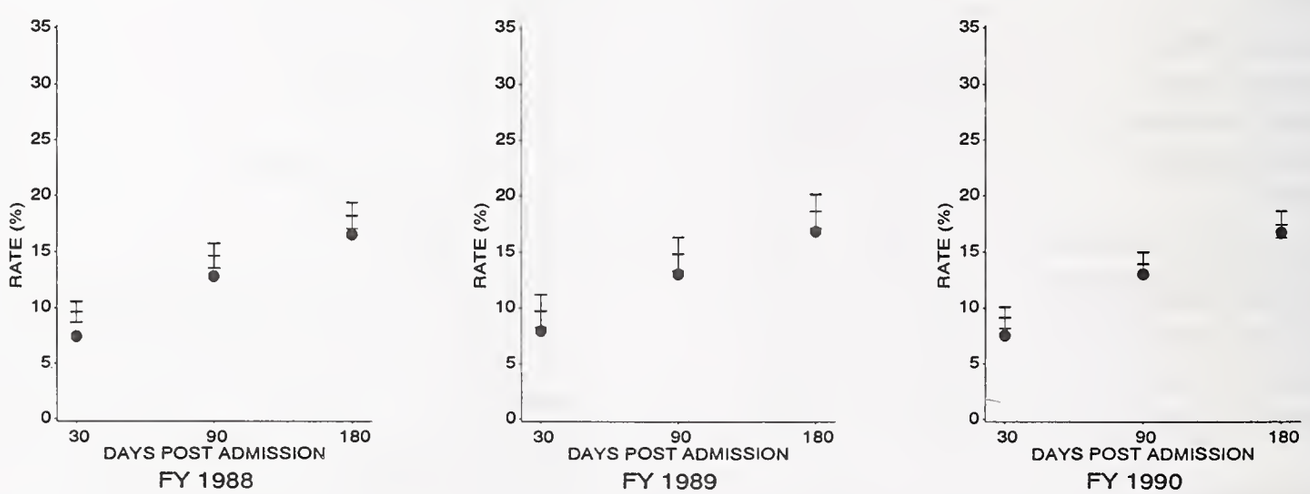
193 MORRIS AVE
SUMMIT, NJ 07901
Medicare Provider Number: 310051

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	4874	7.5	9.1	0.5	13.0	13.9	0.5	16.7	17.4	0.6
CONDITIONS:										
Acute Myocardial Infarction	138	26.1	26.3	3.8	29.7	30.0	3.9	31.9	32.7	4.1
Congestive Heart Failure	282	15.6	15.1	2.4	24.5	23.6	2.7	29.4	29.6	2.7
Pneumonia/Influenza	151	11.9	17.9	5.1	19.2	24.2	5.0	22.5	28.3	5.2
Chronic Obstructive Pulmonary Disease	46	8.7	9.6	-----	17.4	16.2	-----	21.7	21.0	-----
Transient Cerebral Ischemia	82	0.0	2.0	1.9	2.4	4.3	3.3	2.4	6.8	4.2
Stroke	165	18.2	20.2	4.0	26.7	27.3	3.7	32.1	31.1	3.7
Hip Fracture	154	7.8	7.3	2.2	13.6	12.9	3.0	14.9	16.6	3.6
Sepsis	61	29.5	27.6	6.2	36.1	34.0	8.1	45.9	38.4	9.9
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	57	0.0	2.7	3.1	3.5	5.3	3.5	7.0	8.0	4.5
Carotid Endarterectomy	12	8.3	1.4	-----	8.3	2.5	-----	16.7	3.6	-----
Hip Replacement/Reconstruction	99	3.0	3.8	2.2	7.1	7.3	2.9	8.1	9.9	3.9
Open Reduction of Hip Fracture	82	6.1	6.5	3.8	11.0	11.8	5.8	13.4	15.4	6.1
Prostatectomy	265	0.8	1.1	0.9	3.8	2.5	1.4	6.0	4.2	1.9
Cholecystectomy	79	0.0	2.5	3.0	2.5	4.6	3.9	3.8	6.1	3.9
Hysterectomy	42	2.4	0.4	-----	4.8	0.9	-----	4.8	1.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



OVERLOOK HOSPITAL
Medicare Provider Number: 310051

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.6 years
Proportion female	54.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	37.8 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	24.9 %
Admitted for emergency	72.6 %

COMORBIDITIES:

Cancer	9.3 %
Chronic cardiovascular disease	36.1 %
Chronic liver disease	0.9 %
Chronic renal disease	2.5 %
Chronic pulmonary disease	8.7 %
Cerebrovascular degeneration	3.7 %
Diabetes mellitus	5.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	63.2%
State	32.6%
Outside State	4.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.1 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	518
Occupancy Rate	81.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	34.9 %
Case Mix Index (CMI)	1.2487

STAFFING:

Total Number of Physicians	450
Percent of Physicians Board Certified Specialists	80.4 %
Medical Residents/Interns	81
Registered Nurses	629
Licensed Practical Nurses	77

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

PALISADES GENERAL HOSPITAL

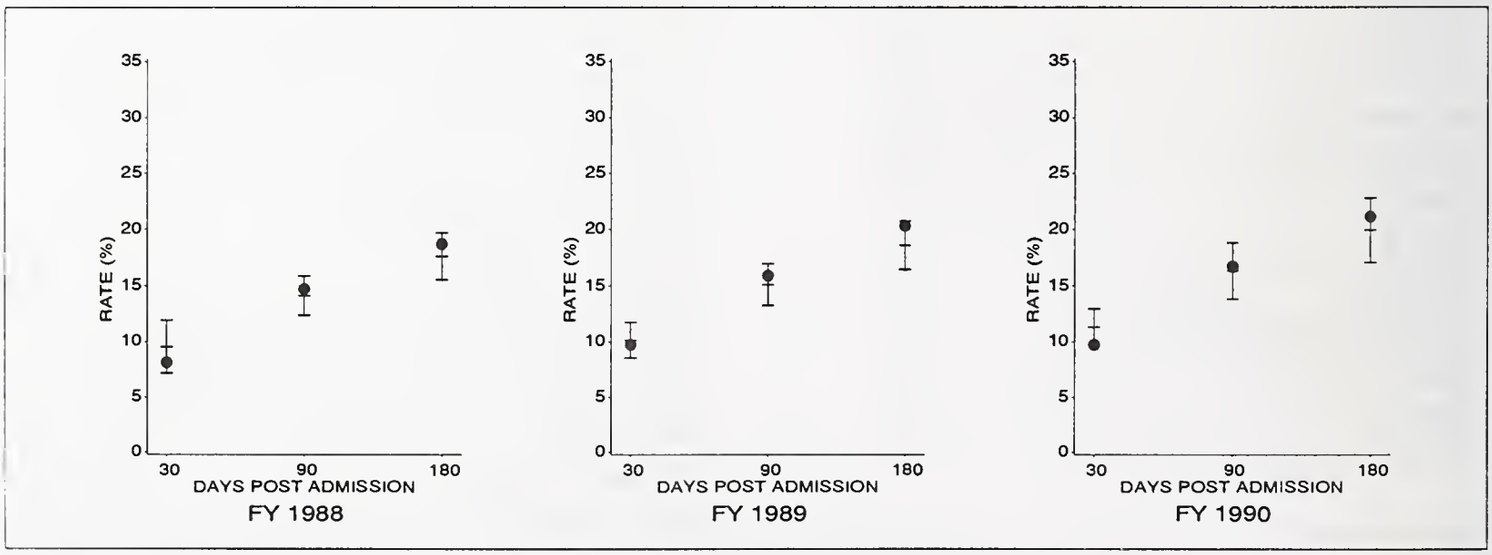
7600 RIVER RD
NORTH BERGEN, NJ 07047
Medicare Provider Number: 310003

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1529	9.7	11.3	0.8	16.7	16.3	1.3	21.1	19.9	1.4
CONDITIONS:										
Acute Myocardial Infarction	67	20.9	28.7	6.5	26.9	31.5	6.0	32.8	34.3	5.9
Congestive Heart Failure	118	11.9	14.8	3.8	23.7	23.6	4.0	33.1	29.8	4.7
Pneumonia/Influenza	64	6.3	16.6	6.6	17.2	22.6	6.9	20.3	26.5	6.4
Chronic Obstructive Pulmonary Disease	33	12.1	8.7	-----	24.2	15.4	-----	27.3	20.1	-----
Transient Cerebral Ischemia	16	0.0	2.1	-----	6.3	4.4	-----	12.5	7.0	-----
Stroke	61	24.6	21.5	7.3	32.8	27.8	7.2	36.1	31.3	7.1
Hip Fracture	53	9.4	7.5	4.6	22.6	13.1	7.7	26.4	16.8	8.4
Sepsis	27	40.7	29.8	-----	55.6	37.5	-----	59.3	42.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	11	9.1	2.8	-----	9.1	5.4	-----	9.1	7.4	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	27	7.4	7.2	-----	25.9	13.3	-----	29.6	17.4	-----
Open Reduction of Hip Fracture	27	11.1	6.1	-----	14.8	11.3	-----	22.2	15.0	-----
Prostatectomy	46	4.3	1.7	-----	6.5	4.0	-----	8.7	6.7	-----
Cholecystectomy	27	7.4	4.2	-----	14.8	7.6	-----	14.8	9.6	-----
Hysterectomy	8	0.0	1.2	-----	0.0	2.9	-----	0.0	4.6	-----

* The Standard Deviation (SD) Is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



PALISADES GENERAL HOSPITAL
Medicare Provider Number: 310003

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.9 years
Proportion female	59.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	24.9 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	24.6 %
Admitted for emergency	28.8 %

COMORBIDITIES:

Cancer	7.7 %
Chronic cardiovascular disease	46.0 %
Chronic liver disease	1.6 %
Chronic renal disease	3.1 %
Chronic pulmonary disease	13.7 %
Cerebrovascular degeneration	3.5 %
Diabetes mellitus	9.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	85.9%
State	11.2%
Outside State	2.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	13.8 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	202
Occupancy Rate	91.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	35.3 %
Case Mix Index (CMI)	1.1909

STAFFING:

Total Number of Physicians	243
Percent of Physicians Board Certified Specialists	63.8 %
Medical Residents/Interns	0
Registered Nurses	118
Licensed Practical Nurses	34

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

PASCACK VALLEY HOSPITAL

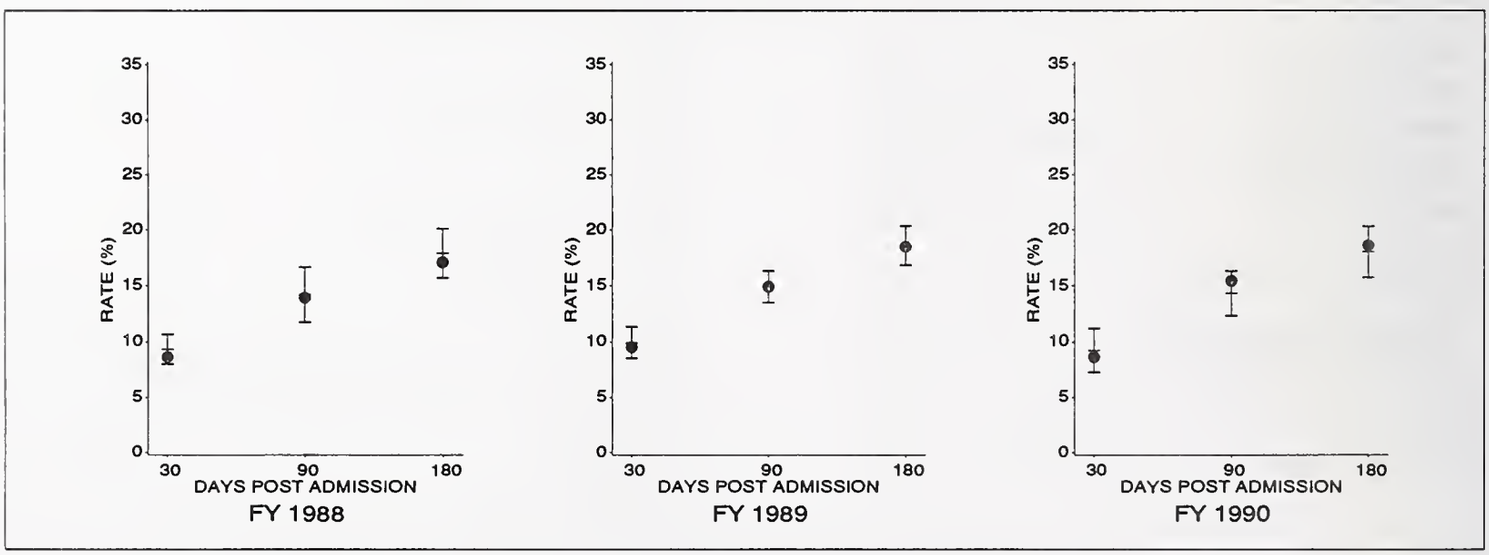
OLD HOOK ROAD
WESTWOOD, NJ 07675
Medicare Provider Number: 310037

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2583	8.6	9.2	1.0	15.4	14.3	1.0	18.6	18.0	1.2
CONDITIONS:										
Acute Myocardial Infarction	72	23.6	28.2	6.5	29.2	31.1	5.9	31.9	33.7	5.9
Congestive Heart Failure	130	6.9	13.9	4.4	13.1	21.9	5.5	18.5	28.0	5.9
Pneumonia/Influenza	115	13.0	15.4	4.7	21.7	21.0	4.2	27.0	24.6	5.4
Chronic Obstructive Pulmonary Disease	45	11.1	9.0	-----	24.4	15.8	-----	28.9	20.6	-----
Transient Cerebral Ischemia	65	0.0	1.7	2.3	1.5	3.8	3.3	1.5	6.2	5.8
Stroke	109	12.8	19.6	5.9	25.7	25.4	4.2	27.5	29.0	5.6
Hip Fracture	96	9.4	6.2	5.1	15.6	11.0	6.2	16.7	14.4	5.3
Sepsis	26	15.4	23.8	-----	26.9	33.3	-----	34.6	38.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	32	3.1	3.7	-----	6.3	7.1	-----	6.3	10.2	-----
Carotid Endarterectomy	3	0.0	1.5	-----	0.0	2.7	-----	66.7	4.1	-----
Hip Replacement/Reconstruction	48	10.4	4.1	-----	16.7	7.7	-----	18.8	10.5	-----
Open Reduction of Hip Fracture	54	11.1	5.8	4.5	14.8	10.6	4.9	14.8	14.2	4.9
Prostatectomy	75	0.0	1.3	1.7	1.3	3.0	2.4	4.0	5.0	2.7
Cholecystectomy	48	0.0	3.0	-----	4.2	5.3	-----	4.2	7.1	-----
Hysterectomy	9	0.0	2.8	-----	0.0	6.1	-----	0.0	9.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



PASCACK VALLEY HOSPITAL
Medicare Provider Number: 310037

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	77.1 years
Proportion female	58.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	40.3 %
Transferred from skilled nursing facility	0.7 %
Admitted for elective procedure	16.5 %
Admitted for emergency	8.9 %

COMORBIDITIES:

Cancer	9.0 %
Chronic cardiovascular disease	41.6 %
Chronic liver disease	0.6 %
Chronic renal disease	1.3 %
Chronic pulmonary disease	12.0 %
Cerebrovascular degeneration	2.0 %
Diabetes mellitus	6.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	87.8%
State	4.3%
Outside State	7.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.6 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	291
Occupancy Rate	69.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	30.8 %
Case Mix Index (CMI)	1.2224

STAFFING:

Total Number of Physicians	260
Percent of Physicians Board Certified Specialists	71.2 %
Medical Residents/Interns	0
Registered Nurses	247
Licensed Practical Nurses	16

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

RAHWAY MEMORIAL HOSPITAL

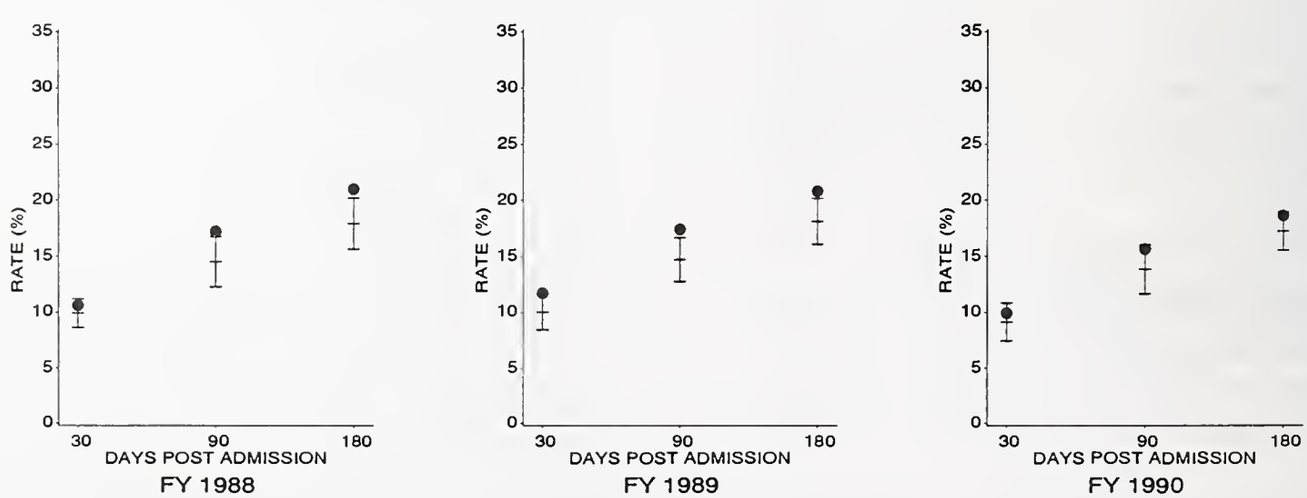
865 STONE ST
RAHWAY, NJ 07065
Medicare Provider Number: 310024

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2547	9.9	9.1	0.9	15.6	13.8	1.1	18.6	17.2	0.9
CONDITIONS:										
Acute Myocardial Infarction	69	34.8	25.4	9.2	37.7	27.9	9.1	37.7	30.4	8.7
Congestive Heart Failure	176	19.9	13.5	4.2	30.1	21.5	5.5	34.1	27.5	5.2
Pneumonia/Influenza	83	16.9	14.7	4.1	26.5	19.8	6.0	31.3	23.1	6.5
Chronic Obstructive Pulmonary Disease	35	5.7	11.0	-----	20.0	18.3	-----	31.4	23.4	-----
Transient Cerebral Ischemia	87	3.4	2.0	2.1	5.7	4.4	2.4	8.0	7.0	3.2
Stroke	110	20.9	21.4	4.5	27.3	27.3	6.2	30.9	30.7	5.8
Hip Fracture	66	7.6	7.3	3.7	10.6	12.8	5.9	18.2	16.4	7.6
Sepsis	22	27.3	22.9	-----	36.4	27.7	-----	36.4	31.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	31	6.5	4.5	-----	9.7	7.9	-----	12.9	10.9	-----
Carotid Endarterectomy	6	0.0	1.8	-----	0.0	3.5	-----	0.0	5.1	-----
Hip Replacement/Reconstruction	27	3.7	5.4	-----	3.7	9.8	-----	11.1	12.8	-----
Open Reduction of Hip Fracture	36	5.6	6.3	-----	8.3	11.7	-----	11.1	15.5	-----
Prostatectomy	108	0.0	0.9	1.3	1.9	2.1	1.4	2.8	3.5	2.1
Cholecystectomy	58	1.7	2.1	2.0	3.4	3.8	3.2	3.4	5.0	3.4
Hysterectomy	22	0.0	0.3	-----	0.0	0.6	-----	0.0	1.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



RAHWAY MEMORIAL HOSPITAL
Medicare Provider Number: 310024

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.8 years
Proportion female	55.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	31.8 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	17.0 %
Admitted for emergency	29.7 %

COMORBIDITIES:

Cancer	8.0 %
Chronic cardiovascular disease	46.2 %
Chronic liver disease	1.1 %
Chronic renal disease	1.6 %
Chronic pulmonary disease	12.4 %
Cerebrovascular degeneration	2.2 %
Diabetes mellitus	8.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	66.7%
State	31.4%
Outside State	1.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.9 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	294
Occupancy Rate	80.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	36.0 %
Case Mix Index (CMI)	1.2000

STAFFING:

Total Number of Physicians	305
Percent of Physicians Board Certified Specialists	59.7 %
Medical Residents/Interns	0
Registered Nurses	246
Licensed Practical Nurses	39

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

RARITAN BAY MEDICAL CENTER

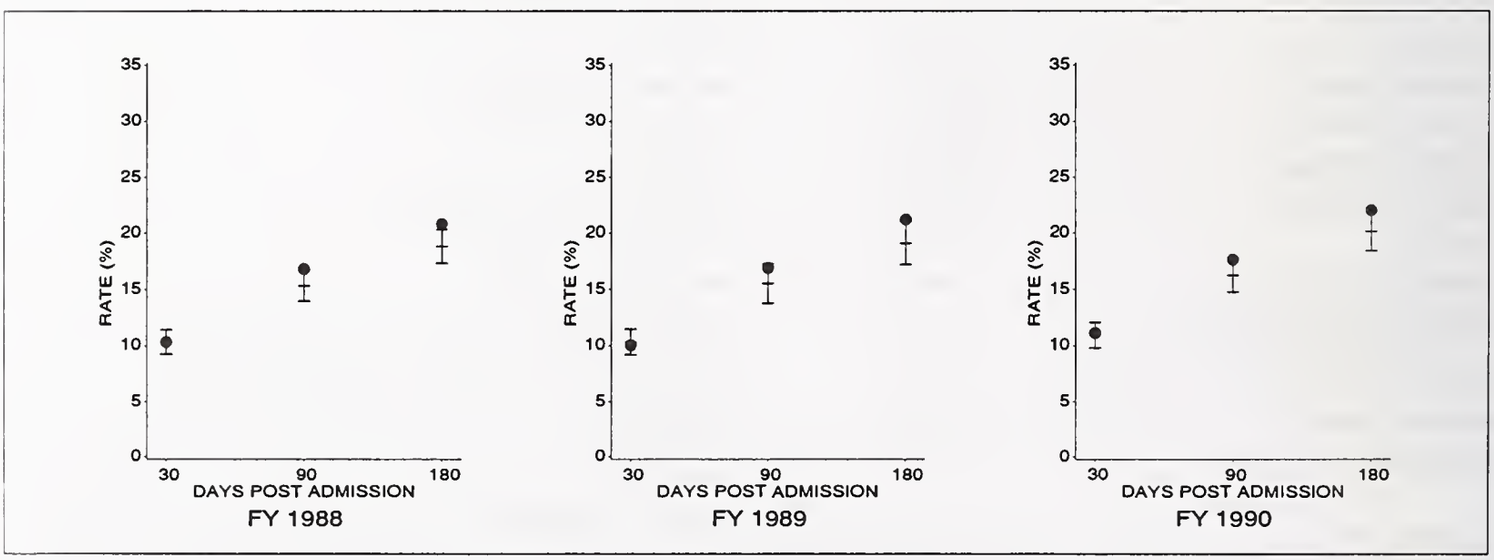
530 NEW BRUNSWICK AVE
PERTH AMBOY, NJ 08861
Medicare Provider Number: 310039

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3014	11.1	10.9	0.6	17.6	16.2	0.7	22.0	20.1	0.9
CONDITIONS:										
Acute Myocardial Infarction	114	30.7	25.8	6.0	34.2	28.9	7.0	37.7	31.6	7.8
Congestive Heart Failure	221	18.1	15.3	3.5	29.9	23.7	4.6	36.2	29.7	4.7
Pneumonia/Influenza	145	18.6	20.4	4.0	26.9	27.4	4.4	33.8	31.8	4.7
Chronic Obstructive Pulmonary Disease	49	22.4	12.6	-----	26.5	20.8	-----	32.7	26.2	-----
Transient Cerebral Ischemia	61	1.6	2.2	1.9	1.6	4.9	3.3	3.3	7.8	4.4
Stroke	114	17.5	21.9	5.2	28.1	28.8	4.5	32.5	32.4	4.6
Hip Fracture	61	4.9	6.6	3.7	13.1	11.7	4.3	16.4	15.2	5.1
Sepsis	39	46.2	34.8	-----	56.4	45.0	-----	66.7	50.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	57	5.3	2.9	3.0	5.3	5.7	4.2	7.0	8.4	6.1
Carotid Endarterectomy	9	0.0	1.3	-----	0.0	2.3	-----	0.0	3.4	-----
Hip Replacement/Reconstruction	26	0.0	4.4	-----	3.8	8.1	-----	7.7	10.7	-----
Open Reduction of Hip Fracture	38	7.9	6.0	-----	15.8	11.0	-----	18.4	14.7	-----
Prostatectomy	80	0.0	1.3	2.2	5.0	2.7	2.2	6.3	4.4	3.3
Cholecystectomy	53	0.0	3.5	4.2	1.9	6.7	5.4	3.8	8.8	5.6
Hysterectomy	20	0.0	0.8	-----	0.0	1.9	-----	5.0	3.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



RARITAN BAY MEDICAL CENTER
Medicare Provider Number: 310039

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.5 years
Proportion female	57.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	25.4 %
Transferred from skilled nursing facility	11.2 %
Admitted for elective procedure	24.4 %
Admitted for emergency	68.8 %

COMORBIDITIES:

Cancer	7.1 %
Chronic cardiovascular disease	42.9 %
Chronic liver disease	1.5 %
Chronic renal disease	5.4 %
Chronic pulmonary disease	8.3 %
Cerebrovascular degeneration	2.8 %
Diabetes mellitus	9.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	85.1%
State	12.0%
Outside State	2.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	14.3 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	461
Occupancy Rate	80.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	31.2 %
Case Mix Index (CMI)	1.2407

STAFFING:

Total Number of Physicians	379
Percent of Physicians Board Certified Specialists	58.3 %
Medical Residents/Interns	27
Registered Nurses	243
Licensed Practical Nurses	104

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

RIVERVIEW HOSPITAL

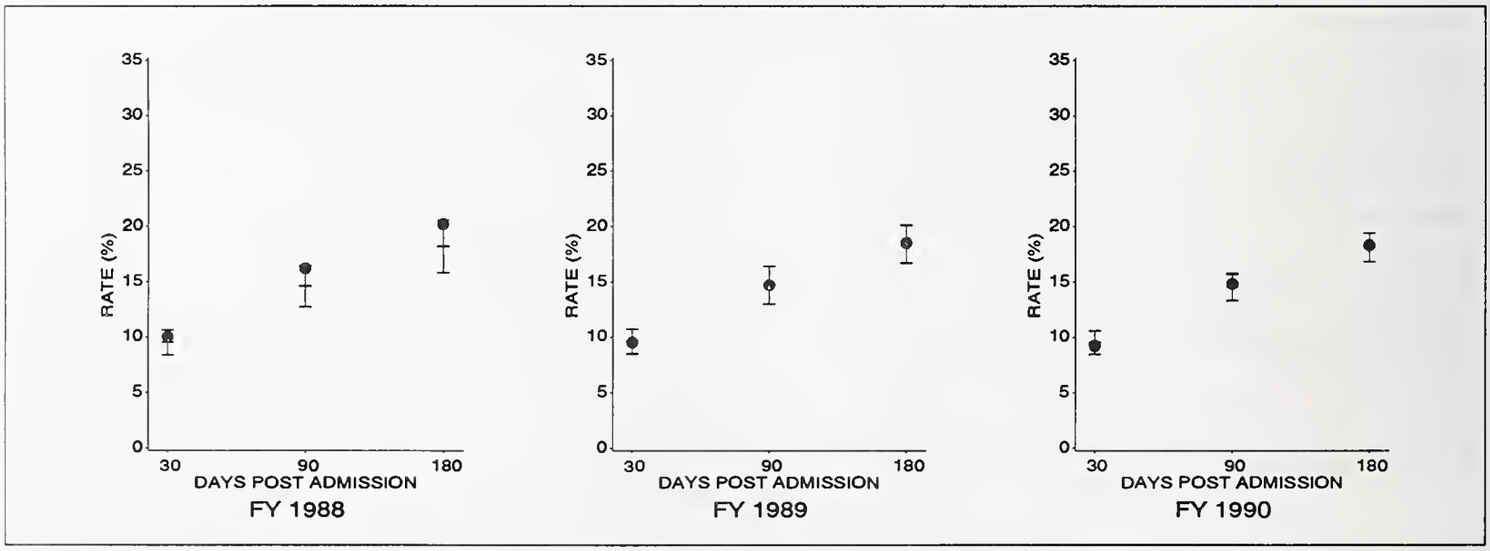
35 UNION ST
RED BANK, NJ 07701
Medicare Provider Number: 310034

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3498	9.2	9.5	0.5	14.8	14.5	0.6	18.3	18.1	0.7
CONDITIONS:										
Acute Myocardial Infarction	96	27.1	31.3	5.8	32.3	34.0	5.1	35.4	36.7	5.0
Congestive Heart Failure	177	12.4	15.8	5.2	24.3	25.1	4.6	29.9	31.4	4.2
Pneumonia/Influenza	138	13.0	17.4	6.2	19.6	23.6	6.3	25.4	27.8	5.5
Chronic Obstructive Pulmonary Disease	31	12.9	11.8	-----	16.1	19.2	-----	19.4	24.2	-----
Transient Cerebral Ischemia	71	4.2	1.9	3.4	4.2	4.0	3.4	5.6	6.3	4.7
Stroke	147	20.4	22.4	3.6	30.6	28.3	3.9	32.0	31.9	5.0
Hip Fracture	97	6.2	7.5	3.5	14.4	13.1	3.8	18.6	16.8	4.0
Sepsis	44	27.3	26.4	-----	36.4	34.4	-----	40.9	39.1	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	35	8.6	3.6	-----	8.6	7.2	-----	11.4	10.5	-----
Carotid Endarterectomy	17	0.0	2.0	-----	5.9	3.6	-----	5.9	5.2	-----
Hip Replacement/Reconstruction	74	1.4	4.6	3.5	6.8	8.1	4.3	6.8	10.5	5.5
Open Reduction of Hip Fracture	40	0.0	6.8	-----	10.0	12.6	-----	17.5	16.5	-----
Prostatectomy	82	2.4	0.7	2.1	2.4	1.7	1.9	3.7	2.9	2.4
Cholecystectomy	60	6.7	2.8	3.9	6.7	4.9	3.2	6.7	6.4	3.2
Hysterectomy	24	0.0	0.9	-----	4.2	2.2	-----	4.2	3.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



RIVERVIEW HOSPITAL
Medicare Provider Number: 310034

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.3 years
Proportion female	57.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	36.9 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	20.1 %
Admitted for emergency	62.8 %

COMORBIDITIES:

Cancer	10.3 %
Chronic cardiovascular disease	41.3 %
Chronic liver disease	1.3 %
Chronic renal disease	1.9 %
Chronic pulmonary disease	12.8 %
Cerebrovascular degeneration	3.0 %
Diabetes mellitus	9.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	89.5%
State	6.4%
Outside State	4.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.8 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	509
Occupancy Rate	72.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	32.1 %
Case Mix Index (CMI)	1.1453

STAFFING:

Total Number of Physicians	390
Percent of Physicians Board Certified Specialists	83.1 %
Medical Residents/Interns	0
Registered Nurses	443
Licensed Practical Nurses	71

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

ROBERT WOOD JOHNSON UNIVERSITY HOSPITAL

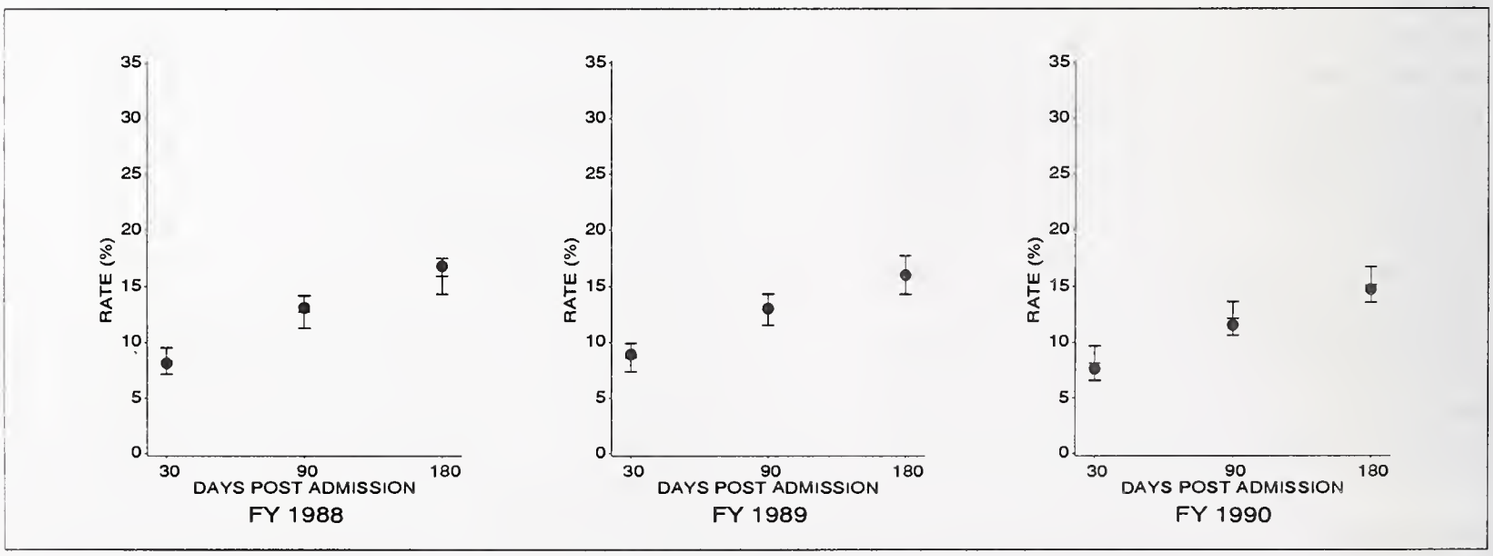
ONE ROBERT WOOD JOHNSON PL
NEW BRUNSWICK, NJ 08901
Medicare Provider Number: 310038

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2654	7.6	8.1	0.8	11.5	12.1	0.8	14.7	15.1	0.8
CONDITIONS:										
Acute Myocardial Infarction	153	20.9	22.3	3.8	25.5	25.7	4.5	28.1	28.5	4.3
Congestive Heart Failure	122	9.0	14.2	5.5	16.4	22.6	6.5	21.3	28.8	6.7
Pneumonia/Influenza	74	14.9	15.8	5.0	17.6	21.1	6.9	18.9	24.7	7.5
Chronic Obstructive Pulmonary Disease	23	21.7	12.9	-----	34.8	21.1	-----	34.8	26.3	-----
Transient Cerebral Ischemia	24	0.0	2.3	-----	8.3	5.1	-----	8.3	7.9	-----
Stroke	73	17.8	21.8	6.7	31.5	27.8	6.9	39.7	31.3	7.1
Hip Fracture	35	0.0	7.5	-----	8.6	13.4	-----	11.4	17.1	-----
Sepsis	24	20.8	24.4	-----	33.3	32.8	-----	33.3	37.3	-----
PROCEDURES:										
Angioplasty	98	4.1	3.1	1.9	7.1	4.0	2.7	9.2	4.9	3.4
Coronary Artery Bypass Graft	100	6.0	5.6	2.3	9.0	8.4	3.2	12.0	9.8	3.7
Initial Pacemaker Insertion	16	0.0	3.9	-----	0.0	7.6	-----	6.3	10.9	-----
Carotid Endarterectomy	19	10.5	1.3	-----	15.8	2.4	-----	15.8	3.6	-----
Hip Replacement/Reconstruction	88	0.0	0.8	1.2	1.1	1.4	1.3	1.1	1.9	1.6
Open Reduction of Hip Fracture	20	0.0	6.3	-----	10.0	12.0	-----	10.0	15.6	-----
Prostatectomy	72	0.0	0.7	-----	0.0	1.7	-----	0.0	3.1	-----
Cholecystectomy	22	4.5	3.9	-----	9.1	8.6	-----	9.1	12.7	-----
Hysterectomy	43	2.3	1.1	-----	4.7	2.6	-----	4.7	4.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ROBERT WOOD JOHNSON UNIVERSITY HOSPITAL

Medicare Provider Number: 310038

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.0 years
Proportion female	51.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	46.8 %
Transferred from skilled nursing facility	1.4 %
Admitted for elective procedure	44.9 %
Admitted for emergency	47.9 %

COMORBIDITIES:

Cancer	6.8 %
Chronic cardiovascular disease	43.9 %
Chronic liver disease	0.7 %
Chronic renal disease	4.1 %
Chronic pulmonary disease	9.2 %
Cerebrovascular degeneration	2.4 %
Diabetes mellitus	7.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	65.5%
State	30.1%
Outside State	4.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.9 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	380
Occupancy Rate	91.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	24.0 %
Case Mix Index (CMI)	1.6168

STAFFING:

Total Number of Physicians	627
Percent of Physicians Board Certified Specialists	82.0 %
Medical Residents/Interns	0
Registered Nurses	421
Licensed Practical Nurses	59

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

ROOSEVELT HOSPITAL

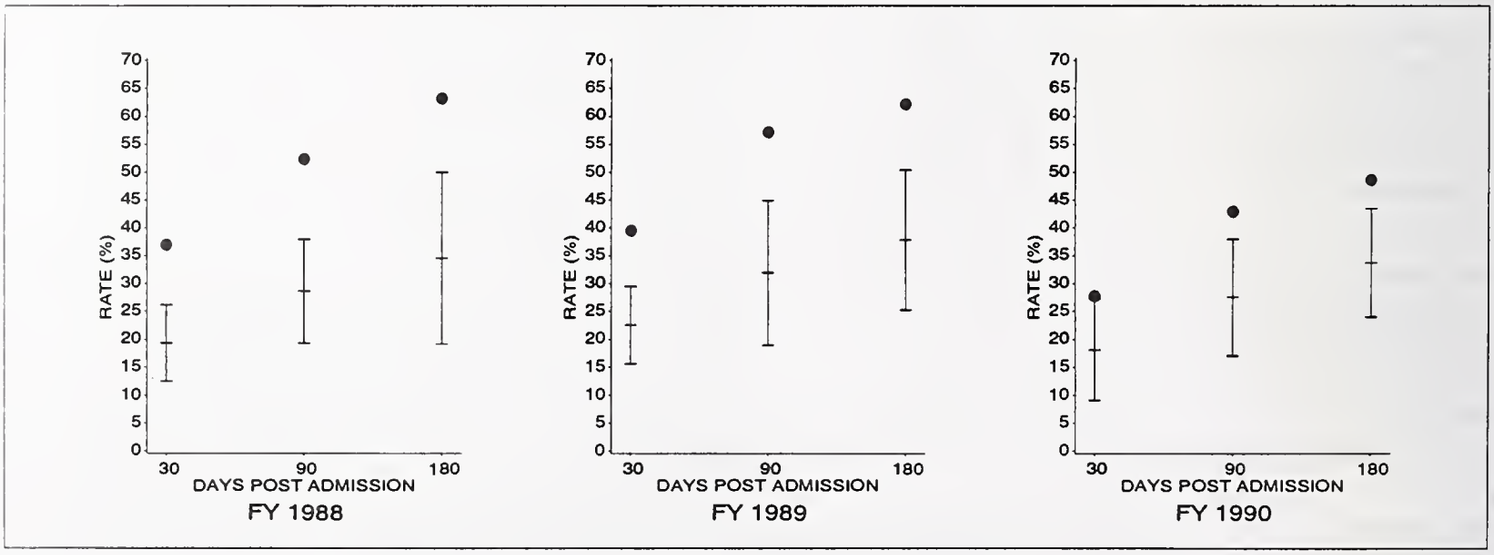
PO BOX 151
METUCHEN, NJ 08840
Medicare Provider Number: 310121

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	177	27.7	18.1	4.5	42.9	27.5	5.2	48.6	33.7	4.9
CONDITIONS:										
Acute Myocardial Infarction	2	50.0	23.7	-----	50.0	26.9	-----	50.0	31.1	-----
Congestive Heart Failure	12	25.0	23.4	-----	50.0	34.8	-----	58.3	40.4	-----
Pneumonia/Influenza	27	51.9	24.4	-----	63.0	32.7	-----	63.0	38.4	-----
Chronic Obstructive Pulmonary Disease	2	50.0	16.3	-----	50.0	25.9	-----	50.0	34.4	-----
Transient Cerebral Ischemia	4	0.0	3.7	-----	0.0	8.8	-----	0.0	14.6	-----
Stroke	5	40.0	29.0	-----	60.0	37.0	-----	60.0	41.7	-----
Hip Fracture	0									
Sepsis	5	100.0	50.4	-----	100.0	60.9	-----	100.0	65.3	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ROOSEVELT HOSPITAL
Medicare Provider Number: 310121

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	81.2 years
Proportion female	68.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	2.8 %
Transferred from skilled nursing facility	57.1 %
Admitted for elective procedure	0.0 %
Admitted for emergency	1.1 %

COMORBIDITIES:

Cancer	10.7 %
Chronic cardiovascular disease	53.1 %
Chronic liver disease	0.0 %
Chronic renal disease	1.7 %
Chronic pulmonary disease	5.1 %
Cerebrovascular degeneration	8.5 %
Diabetes mellitus	10.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	88.1%
State	10.3%
Outside State	1.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	16.0 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	558
Occupancy Rate	89.0 %
Ownership/Control	Local Government
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.0342

STAFFING:

Total Number of Physicians	28
Percent of Physicians Board Certified Specialists	92.9 %
Medical Residents/Interns	0
Registered Nurses	12
Licensed Practical Nurses	11

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

SALEM COUNTY MEMORIAL HOSPITAL

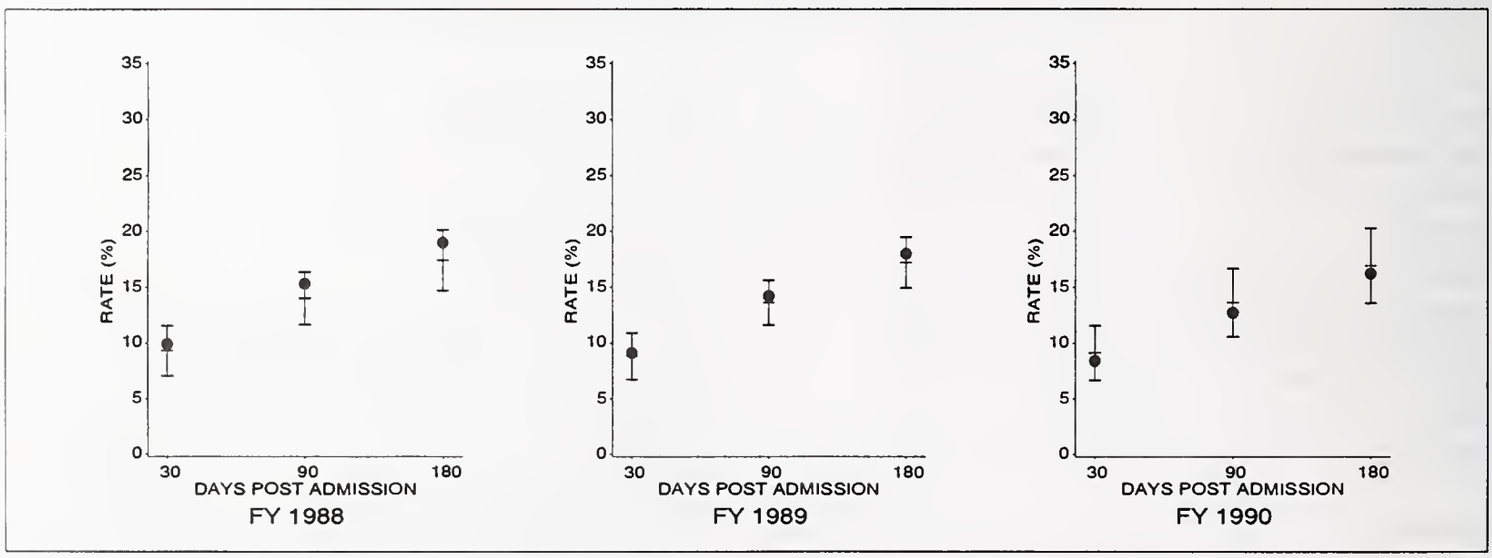
WOODSTOWN RD
SALEM, NJ 08079
Medicare Provider Number: 310091

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1446	8.4	9.1	1.2	12.7	13.6	1.5	16.2	16.9	1.7
CONDITIONS:										
Acute Myocardial Infarction	46	23.9	28.4	-----	28.3	31.4	-----	28.3	34.0	-----
Congestive Heart Failure	75	14.7	15.0	4.6	20.0	23.6	5.5	29.3	29.7	7.5
Pneumonia/Influenza	56	14.3	16.5	5.5	21.4	22.3	6.3	25.0	26.2	7.8
Chronic Obstructive Pulmonary Disease	25	4.0	7.2	-----	8.0	12.8	-----	12.0	17.3	-----
Transient Cerebral Ischemia	29	0.0	1.8	-----	6.9	4.1	-----	6.9	6.7	-----
Stroke	71	21.1	20.1	5.8	29.6	26.2	7.1	31.0	29.7	6.5
Hip Fracture	41	7.3	6.7	-----	12.2	12.2	-----	17.1	15.9	-----
Sepsis	20	30.0	29.6	-----	40.0	37.9	-----	45.0	42.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	13	0.0	5.9	-----	0.0	10.1	-----	30.8	13.2	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	26	3.8	3.9	-----	3.8	7.2	-----	11.5	9.8	-----
Open Reduction of Hip Fracture	17	5.9	7.1	-----	11.8	13.5	-----	17.6	17.8	-----
Prostatectomy	45	2.2	1.3	-----	4.4	3.0	-----	4.4	5.0	-----
Cholecystectomy	37	0.0	2.7	-----	2.7	4.3	-----	2.7	5.5	-----
Hysterectomy	7	0.0	0.1	-----	0.0	0.2	-----	0.0	0.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SALEM COUNTY MEMORIAL HOSPITAL

Medicare Provider Number: 310091

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.9 years
Proportion female	58.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	32.0 %
Transferred from skilled nursing facility	4.0 %
Admitted for elective procedure	17.8 %
Admitted for emergency	80.6 %

COMORBIDITIES:

Cancer	5.8 %
Chronic cardiovascular disease	32.0 %
Chronic liver disease	1.2 %
Chronic renal disease	2.8 %
Chronic pulmonary disease	15.7 %
Cerebrovascular degeneration	5.5 %
Diabetes mellitus	7.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	91.0%
State	7.1%
Outside State	1.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.4 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	152
Occupancy Rate	73.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	36.8 %
Case Mix Index (CMI)	1.2273

STAFFING:

Total Number of Physicians	73
Percent of Physicians Board Certified Specialists	61.6 %
Medical Residents/Interns	0
Registered Nurses	147
Licensed Practical Nurses	50

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

SHORE MEMORIAL HOSPITAL

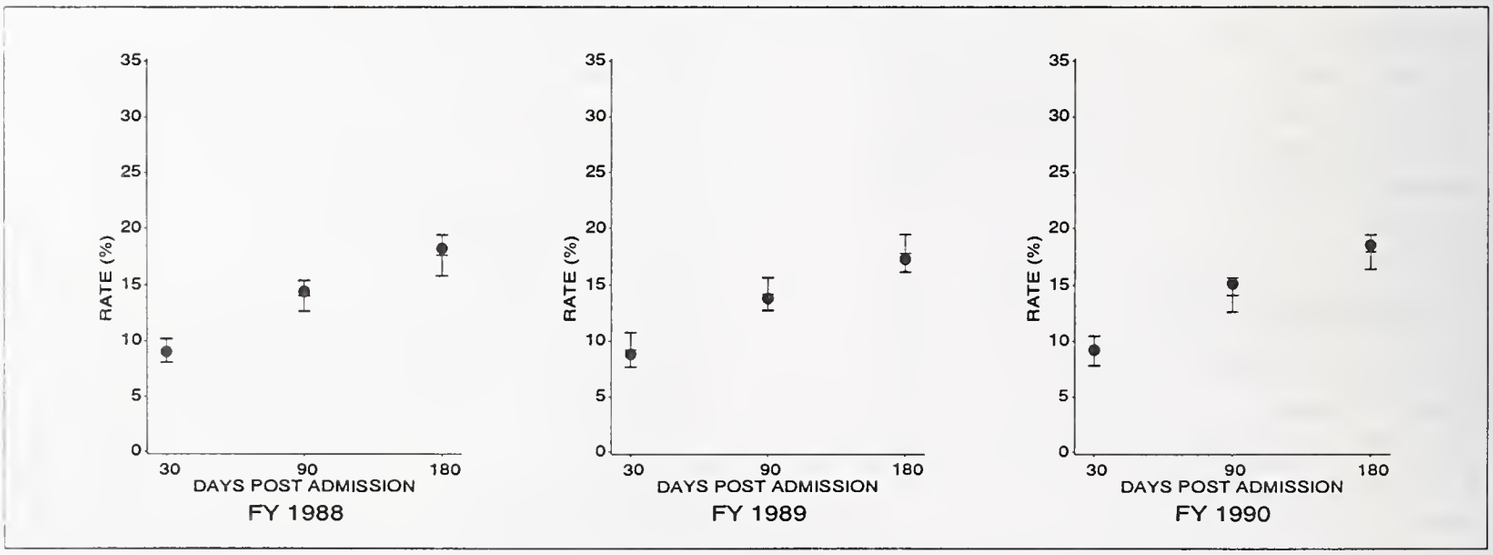
NEW YORK & SUNNY AVES
SOMERS POINT, NJ 08244
Medicare Provider Number: 310047

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2906	9.2	9.1	0.7	15.1	14.1	0.8	18.5	17.9	0.8
CONDITIONS:										
Acute Myocardial Infarction	84	25.0	29.1	6.8	28.6	31.9	7.2	28.6	34.7	7.9
Congestive Heart Failure	169	11.8	13.6	3.9	18.9	21.5	4.6	25.4	27.3	5.5
Pneumonia/Influenza	103	15.5	16.0	4.3	25.2	22.0	5.1	26.2	26.1	4.4
Chronic Obstructive Pulmonary Disease	53	9.4	8.7	5.1	17.0	15.3	7.6	18.9	20.4	10.0
Transient Cerebral Ischemia	68	2.9	2.2	2.2	7.4	4.7	3.4	11.8	7.3	4.7
Stroke	110	18.2	20.2	4.1	31.8	26.9	4.5	35.5	30.7	4.6
Hip Fracture	76	7.9	7.6	3.7	15.8	13.6	4.2	17.1	17.6	4.6
Sepsis	25	32.0	33.3	-----	52.0	42.6	-----	56.0	47.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	24	8.3	5.4	-----	12.5	9.0	-----	12.5	11.6	-----
Carotid Endarterectomy	25	0.0	1.5	-----	4.0	2.7	-----	8.0	4.0	-----
Hip Replacement/Reconstruction	37	10.8	3.6	-----	13.5	6.9	-----	13.5	9.4	-----
Open Reduction of Hip Fracture	51	3.9	7.1	5.0	11.8	13.1	5.1	13.7	17.3	6.9
Prostatectomy	90	2.2	1.2	1.7	2.2	2.7	1.9	2.2	4.6	3.0
Cholecystectomy	49	8.2	3.4	-----	10.2	6.4	-----	12.2	8.5	-----
Hysterectomy	11	0.0	0.3	-----	0.0	0.8	-----	0.0	1.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SHORE MEMORIAL HOSPITAL
Medicare Provider Number: 310047

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.1 years
Proportion female	54.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	37.6 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	19.8 %
Admitted for emergency	60.6 %

COMORBIDITIES:

Cancer	9.2 %
Chronic cardiovascular disease	39.7 %
Chronic liver disease	2.0 %
Chronic renal disease	6.5 %
Chronic pulmonary disease	18.7 %
Cerebrovascular degeneration	2.3 %
Diabetes mellitus	8.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	58.4%
State	33.9%
Outside State	7.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.9 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	284
Occupancy Rate	83.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	34.4 %
Case Mix Index (CMI)	1.2612

STAFFING:

Total Number of Physicians	198
Percent of Physicians Board Certified Specialists	69.7 %
Medical Residents/Interns	0
Registered Nurses	304
Licensed Practical Nurses	102

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

SOMERSET MEDICAL CENTER

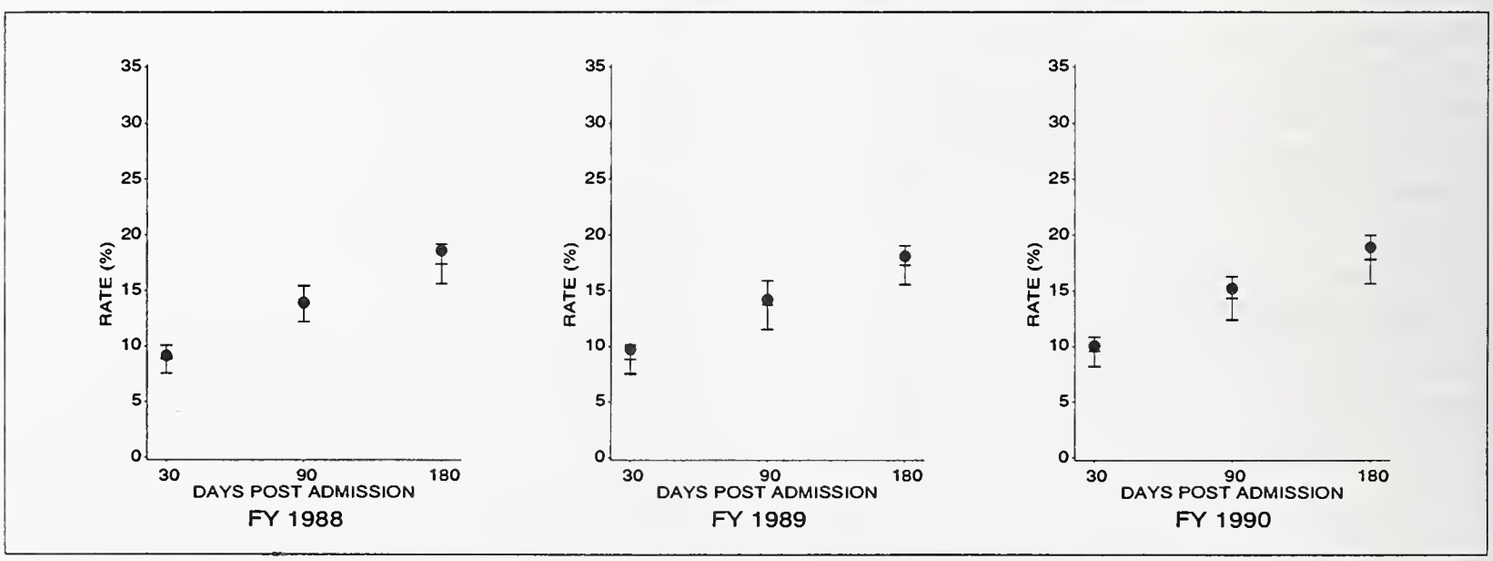
110 REHILL AVE
SOMERVILLE, NJ 08876
Medicare Provider Number: 310048

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2960	10.0	9.5	0.7	15.2	14.3	1.0	18.9	17.8	1.1
CONDITIONS:										
Acute Myocardial Infarction	118	28.0	25.0	4.6	31.4	27.9	4.8	32.2	30.7	4.4
Congestive Heart Failure	166	14.5	14.4	2.9	24.1	22.5	3.8	30.7	28.5	4.6
Pneumonia/Influenza	112	17.0	15.7	3.8	25.0	21.4	4.6	26.8	25.1	4.2
Chronic Obstructive Pulmonary Disease	45	13.3	8.8	-----	15.6	15.0	-----	17.8	19.6	-----
Transient Cerebral Ischemia	58	1.7	1.6	2.0	5.2	3.6	2.7	6.9	5.7	3.2
Stroke	126	24.6	21.8	4.5	30.2	28.1	4.7	36.5	31.6	5.2
Hip Fracture	62	1.6	5.9	4.0	6.5	10.6	4.8	9.7	13.9	5.3
Sepsis	33	33.3	29.1	-----	42.4	36.9	-----	54.5	41.4	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	29	3.4	3.6	-----	10.3	6.6	-----	13.8	9.2	-----
Carotid Endarterectomy	12	16.7	1.5	-----	25.0	3.0	-----	25.0	4.5	-----
Hip Replacement/Reconstruction	34	2.9	3.4	-----	2.9	6.3	-----	2.9	8.4	-----
Open Reduction of Hip Fracture	38	0.0	4.9	-----	5.3	9.3	-----	7.9	12.6	-----
Prostatectomy	94	0.0	1.0	1.5	4.3	2.2	2.4	4.3	3.8	2.1
Cholecystectomy	56	0.0	2.1	2.8	1.8	4.0	3.3	1.8	5.4	4.4
Hysterectomy	23	0.0	0.4	-----	0.0	0.9	-----	0.0	1.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SOMERSET MEDICAL CENTER
Medicare Provider Number: 310048

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.2 years
Proportion female	57.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	40.3 %
Transferred from skilled nursing facility	3.2 %
Admitted for elective procedure	17.4 %
Admitted for emergency	27.6 %

COMORBIDITIES:

Cancer	8.6 %
Chronic cardiovascular disease	36.4 %
Chronic liver disease	1.6 %
Chronic renal disease	2.3 %
Chronic pulmonary disease	10.2 %
Cerebrovascular degeneration	4.0 %
Diabetes mellitus	7.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	73.4%
State	23.7%
Outside State	2.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.5 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	377
Occupancy Rate	67.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	32.4 %
Case Mix Index (CMI)	1.1684

STAFFING:

Total Number of Physicians	263
Percent of Physicians Board Certified Specialists	93.2 %
Medical Residents/Interns	21
Registered Nurses	289
Licensed Practical Nurses	64

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

SOUTH AMBOY MEMORIAL HOSPITAL

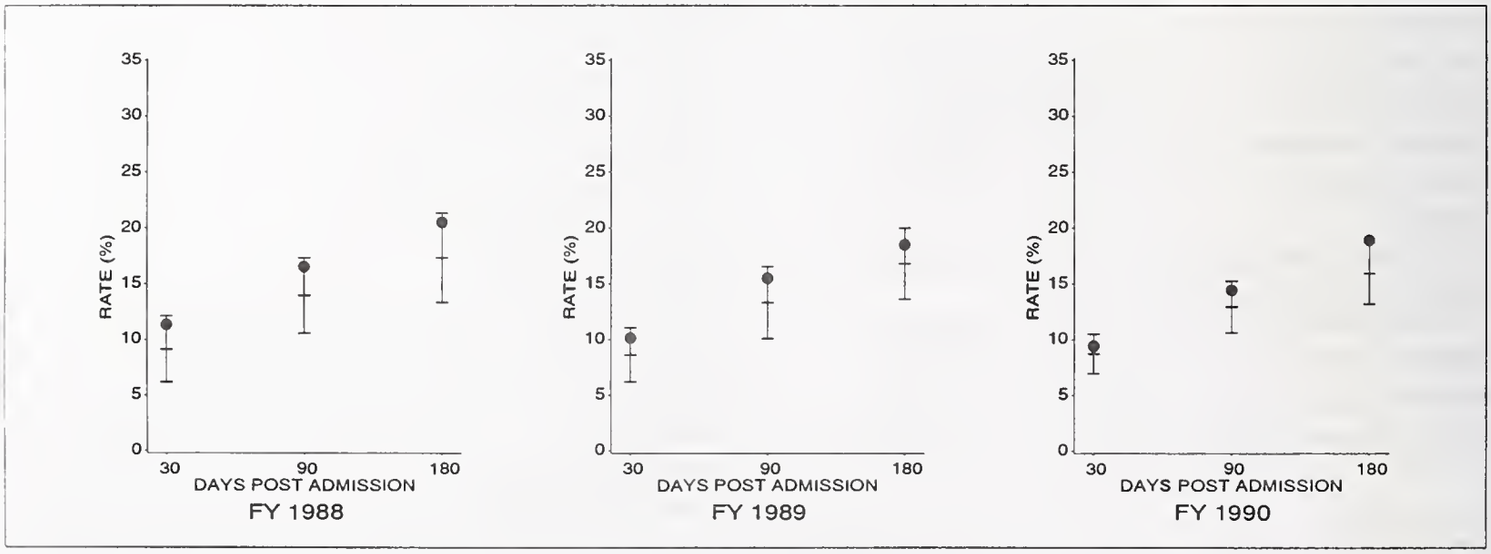
540 BORDENTOWN AVE
SOUTH AMBOY, NJ 08879
Medicare Provider Number: 310036

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	1118	9.4	8.7	0.9	14.4	12.9	1.2	18.9	15.9	1.4
CONDITIONS:										
Acute Myocardial Infarction	30	36.7	30.0	-----	40.0	33.5	-----	43.3	36.8	-----
Congestive Heart Failure	65	10.8	13.2	6.1	16.9	21.0	8.7	27.7	27.0	9.0
Pneumonia/Influenza	30	6.7	14.3	-----	16.7	19.8	-----	26.7	23.5	-----
Chronic Obstructive Pulmonary Disease	14	7.1	9.1	-----	21.4	15.3	-----	28.6	20.1	-----
Transient Cerebral Ischemia	34	0.0	2.1	-----	2.9	4.6	-----	5.9	7.2	-----
Stroke	44	31.8	21.1	-----	40.9	27.6	-----	52.3	31.6	-----
Hip Fracture	10	0.0	7.9	-----	0.0	13.4	-----	0.0	16.9	-----
Sepsis	12	25.0	24.4	-----	25.0	32.3	-----	33.3	37.3	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	7	14.3	6.0	-----	14.3	10.6	-----	42.9	13.9	-----
Carotid Endarterectomy	5	0.0	1.5	-----	20.0	2.8	-----	20.0	4.1	-----
Hip Replacement/Reconstruction	9	0.0	2.4	-----	0.0	4.1	-----	11.1	5.2	-----
Open Reduction of Hip Fracture	7	0.0	7.3	-----	0.0	13.3	-----	0.0	17.1	-----
Prostatectomy	18	0.0	0.7	-----	5.6	1.5	-----	5.6	2.7	-----
Cholecystectomy	21	0.0	2.5	-----	0.0	4.6	-----	4.8	6.0	-----
Hysterectomy	5	0.0	0.2	-----	0.0	0.4	-----	0.0	0.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SOUTH AMBOY MEMORIAL HOSPITAL

Medicare Provider Number: 310036

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	71.0 years
Proportion female	54.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	30.9 %
Transferred from skilled nursing facility	5.0 %
Admitted for elective procedure	8.8 %
Admitted for emergency	2.1 %

COMORBIDITIES:

Cancer	5.7 %
Chronic cardiovascular disease	37.2 %
Chronic liver disease	1.3 %
Chronic renal disease	1.5 %
Chronic pulmonary disease	10.9 %
Cerebrovascular degeneration	6.3 %
Diabetes mellitus	8.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	85.5%
State	11.9%
Outside State	2.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	12.6 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	161
Occupancy Rate	72.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	45.1 %
Case Mix Index (CMI)	1.1888

STAFFING:

Total Number of Physicians	86
Percent of Physicians Board Certified Specialists	51.2 %
Medical Residents/Interns	0
Registered Nurses	82
Licensed Practical Nurses	36

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

SOUTH JERSEY HOSPITAL SYSTEM

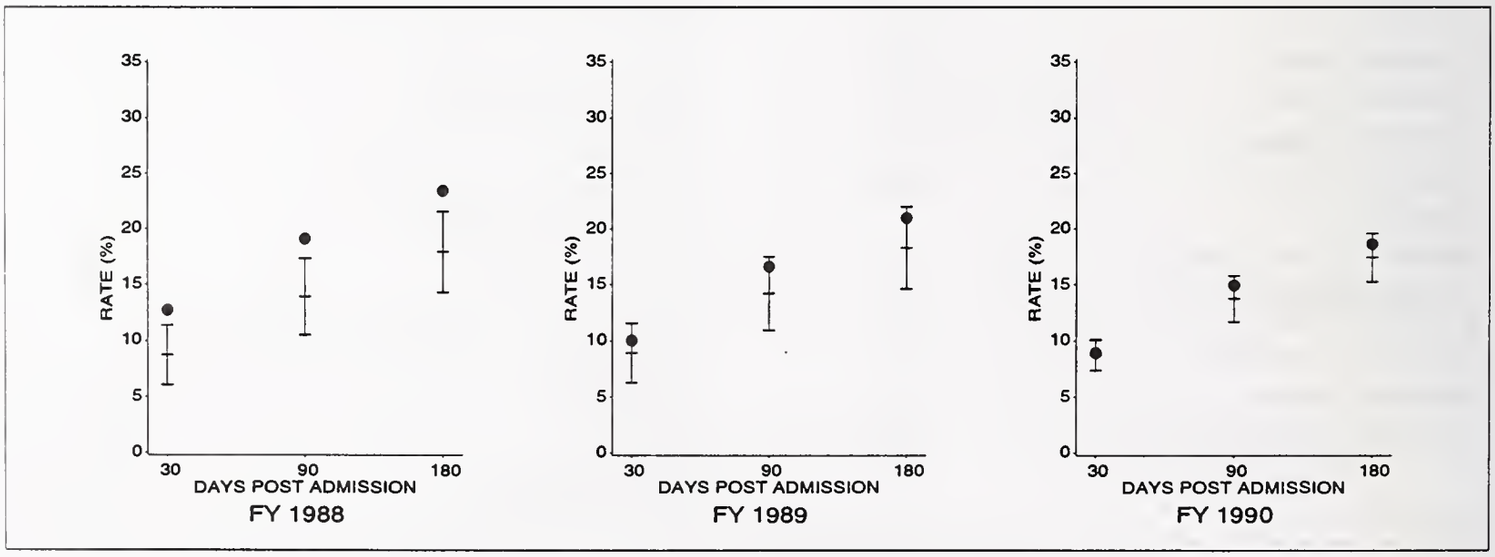
IRVING & MAGNOLIA AVES
BRIDGETON, NJ 08302
Medicare Provider Number: 310032

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	2198	8.9	8.7	0.7	14.9	13.7	1.0	18.6	17.4	1.1
CONDITIONS:										
Acute Myocardial Infarction	44	11.4	25.6	-----	15.9	28.5	-----	15.9	31.3	-----
Congestive Heart Failure	149	15.4	14.2	3.0	21.5	22.8	3.7	25.5	29.2	4.8
Pneumonia/Influenza	67	17.9	15.8	6.4	26.9	21.7	6.9	31.3	25.8	7.2
Chronic Obstructive Pulmonary Disease	44	18.2	9.1	-----	25.0	15.5	-----	29.5	20.3	-----
Transient Cerebral Ischemia	38	0.0	1.4	-----	2.6	3.2	-----	5.3	5.4	-----
Stroke	74	20.3	16.9	6.0	25.7	22.9	5.4	27.0	26.5	5.7
Hip Fracture	42	2.4	6.4	-----	9.5	11.3	-----	14.3	14.7	-----
Sepsis	22	54.5	30.1	-----	63.6	40.0	-----	63.6	45.7	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	17	0.0	3.5	-----	11.8	7.5	-----	17.6	11.2	-----
Carotid Endarterectomy	5	0.0	1.3	-----	0.0	2.4	-----	0.0	3.4	-----
Hip Replacement/Reconstruction	22	0.0	2.7	-----	0.0	4.7	-----	4.5	6.1	-----
Open Reduction of Hip Fracture	28	3.6	5.5	-----	10.7	10.2	-----	14.3	13.8	-----
Prostatectomy	43	4.7	1.3	-----	4.7	3.1	-----	4.7	5.4	-----
Cholecystectomy	39	5.1	3.4	-----	7.7	6.1	-----	12.8	7.8	-----
Hysterectomy	19	0.0	1.0	-----	0.0	2.3	-----	0.0	3.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SOUTH JERSEY HOSPITAL SYSTEM

Medicare Provider Number: 310032

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.3 years
Proportion female	56.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	38.4 %
Transferred from skilled nursing facility	1.5 %
Admitted for elective procedure	25.8 %
Admitted for emergency	36.1 %

COMORBIDITIES:

Cancer	10.3 %
Chronic cardiovascular disease	30.9 %
Chronic liver disease	1.0 %
Chronic renal disease	5.6 %
Chronic pulmonary disease	15.6 %
Cerebrovascular degeneration	4.6 %
Diabetes mellitus	11.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	90.7%
State	8.0%
Outside State	1.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	12.2 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	310
Occupancy Rate	72.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	39.9 %
Case Mix Index (CMI)	1.2210

STAFFING:

Total Number of Physicians	115
Percent of Physicians Board Certified Specialists	73.9 %
Medical Residents/Interns	0
Registered Nurses	230
Licensed Practical Nurses	146

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

SOUTHERN OCEAN COUNTY HOSPITAL

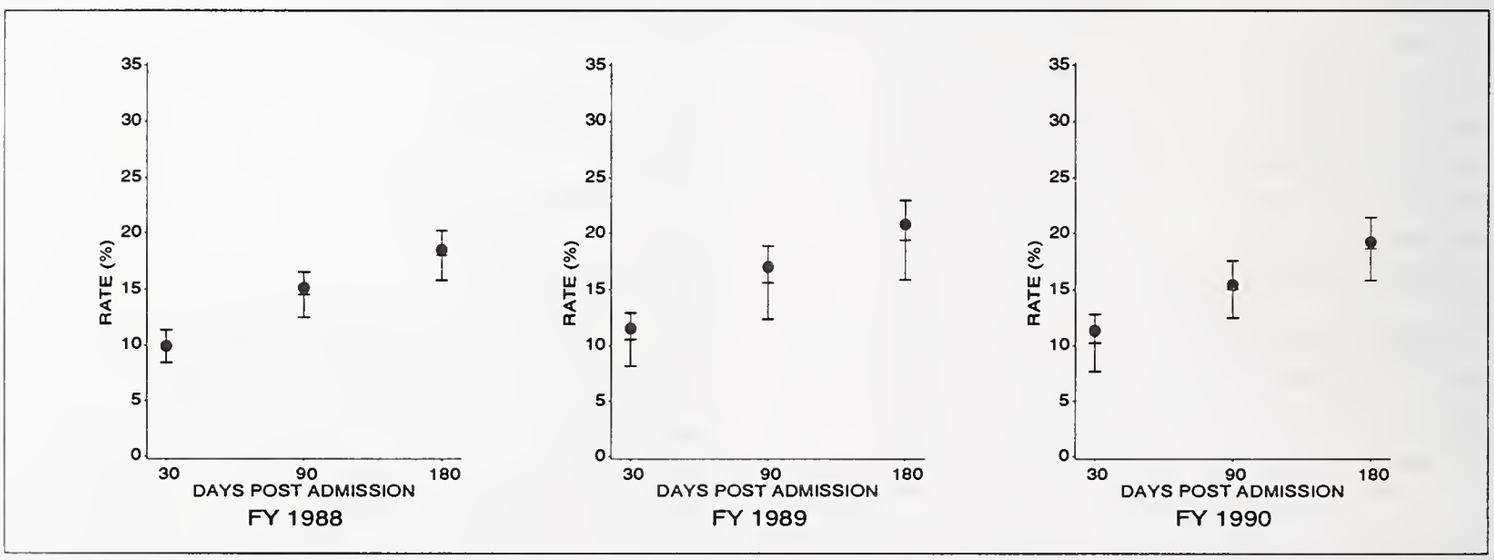
1140 W BAY AVE
MANAHAWKIN, NJ 08050
Medicare Provider Number: 310113

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1659	11.3	10.2	1.3	15.4	15.0	1.3	19.2	18.6	1.4
CONDITIONS:										
Acute Myocardial Infarction	81	38.3	25.4	6.7	40.7	28.8	6.6	40.7	31.7	6.1
Congestive Heart Failure	106	16.0	14.5	3.9	20.8	23.3	4.6	27.4	29.5	4.8
Pneumonia/Influenza	87	16.1	17.7	5.1	23.0	24.4	4.8	27.6	28.5	5.3
Chronic Obstructive Pulmonary Disease	35	8.6	8.8	-----	11.4	14.8	-----	20.0	19.3	-----
Transient Cerebral Ischemia	26	0.0	1.2	-----	3.8	2.9	-----	3.8	5.0	-----
Stroke	93	15.1	17.1	4.3	21.5	23.4	5.5	23.7	27.0	6.4
Hip Fracture	40	2.5	5.1	-----	5.0	9.3	-----	10.0	12.3	-----
Sepsis	27	22.2	24.5	-----	22.2	30.5	-----	25.9	34.8	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	18	0.0	3.6	-----	0.0	7.0	-----	11.1	10.2	-----
Carotid Endarterectomy	9	0.0	1.2	-----	11.1	2.3	-----	22.2	3.4	-----
Hip Replacement/Reconstruction	25	0.0	2.8	-----	0.0	5.0	-----	8.0	6.8	-----
Open Reduction of Hip Fracture	17	5.9	4.8	-----	11.8	9.1	-----	11.8	12.2	-----
Prostatectomy	38	2.6	1.0	-----	2.6	2.1	-----	5.3	3.4	-----
Cholecystectomy	37	2.7	1.8	-----	2.7	3.3	-----	5.4	4.4	-----
Hysterectomy	16	0.0	0.8	-----	0.0	1.9	-----	0.0	3.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SOUTHERN OCEAN COUNTY HOSPITAL
Medicare Provider Number: 310113

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.5 years
Proportion female	54.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	31.6 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	19.5 %
Admitted for emergency	67.3 %

COMORBIDITIES:

Cancer	8.9 %
Chronic cardiovascular disease	36.4 %
Chronic liver disease	1.4 %
Chronic renal disease	2.2 %
Chronic pulmonary disease	13.9 %
Cerebrovascular degeneration	3.9 %
Diabetes mellitus	4.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	89.0%
State	6.3%
Outside State	4.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.2 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1990

PROFILE:

Total Beds	100
Ownership.Control	Private, Non-Profit
Case Mix Index (CMI)	1.2482

STAFFING:

Medical Residents/Interns	1
Registered Nurses	89
Licensed Practical Nurses	25

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	No
Hospice Care	No
Intensive Care Unit	Yes
Organ Transplant	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

ST BARNABAS MEDICAL CENTER

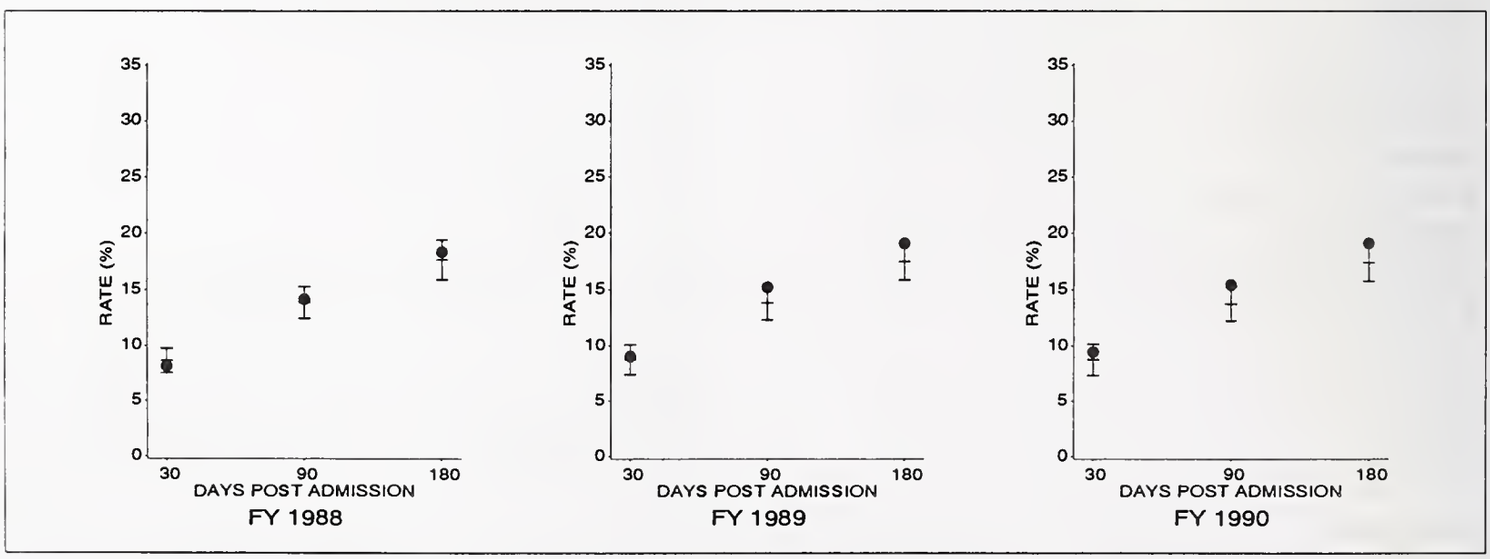
OLD SHORT HILLS RD
LIVINGSTON, NJ 07039
Medicare Provider Number: 310076

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	4373	9.4	8.7	0.7	15.4	13.7	0.8	19.1	17.4	0.8
CONDITIONS:										
Acute Myocardial Infarction	125	29.6	25.3	5.2	34.4	28.9	6.2	39.2	31.8	7.5
Congestive Heart Failure	199	16.6	15.3	3.2	26.6	24.3	3.6	30.2	30.7	3.5
Pneumonia/Influenza	88	19.3	17.5	4.1	21.6	23.6	4.7	22.7	27.9	5.3
Chronic Obstructive Pulmonary Disease	40	2.5	8.8	-----	10.0	15.3	-----	15.0	20.2	-----
Transient Cerebral Ischemia	72	0.0	1.7	2.4	2.8	3.7	2.5	2.8	5.9	4.5
Stroke	146	26.0	21.4	6.1	37.7	29.0	6.6	41.1	33.2	6.5
Hip Fracture	100	4.0	6.5	3.7	10.0	11.6	4.3	13.0	15.3	4.0
Sepsis	64	35.9	30.6	7.0	43.8	42.0	6.7	48.4	47.6	6.3
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	58	6.9	3.0	3.5	6.9	5.9	3.5	10.3	8.6	3.9
Carotid Endarterectomy	15	6.7	2.1	-----	6.7	3.7	-----	6.7	5.2	-----
Hip Replacement/Reconstruction	72	1.4	4.5	4.0	6.9	8.5	4.9	11.1	11.3	4.3
Open Reduction of Hip Fracture	50	6.0	5.8	-----	8.0	10.5	-----	10.0	14.0	-----
Prostatectomy	160	1.2	0.9	1.3	3.7	2.1	2.0	5.6	3.5	2.6
Cholecystectomy	83	1.2	2.4	2.0	3.6	4.1	2.2	3.6	5.4	2.9
Hysterectomy	72	0.0	0.8	1.2	1.4	1.9	1.7	1.4	3.1	2.5

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST BARNABAS MEDICAL CENTER

Medicare Provider Number: 310076

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.2 years
Proportion female	57.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	91.7 %
Transferred from skilled nursing facility	4.9 %
Admitted for elective procedure	36.0 %
Admitted for emergency	60.0 %

COMORBIDITIES:

Cancer	10.8 %
Chronic cardiovascular disease	36.4 %
Chronic liver disease	0.9 %
Chronic renal disease	6.2 %
Chronic pulmonary disease	7.2 %
Cerebrovascular degeneration	3.0 %
Diabetes mellitus	7.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	65.3%
State	30.5%
Outside State	4.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.3 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	564
Occupancy Rate	88.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	25.9 %
Case Mix Index (CMI)	1.2579

STAFFING:

Total Number of Physicians	842
Percent of Physicians Board Certified Specialists	77.2 %
Medical Residents/Interns	122
Registered Nurses	524
Licensed Practical Nurses	89

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	Yes
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

ST CLARES RIVERSIDE MEDICAL CENTER

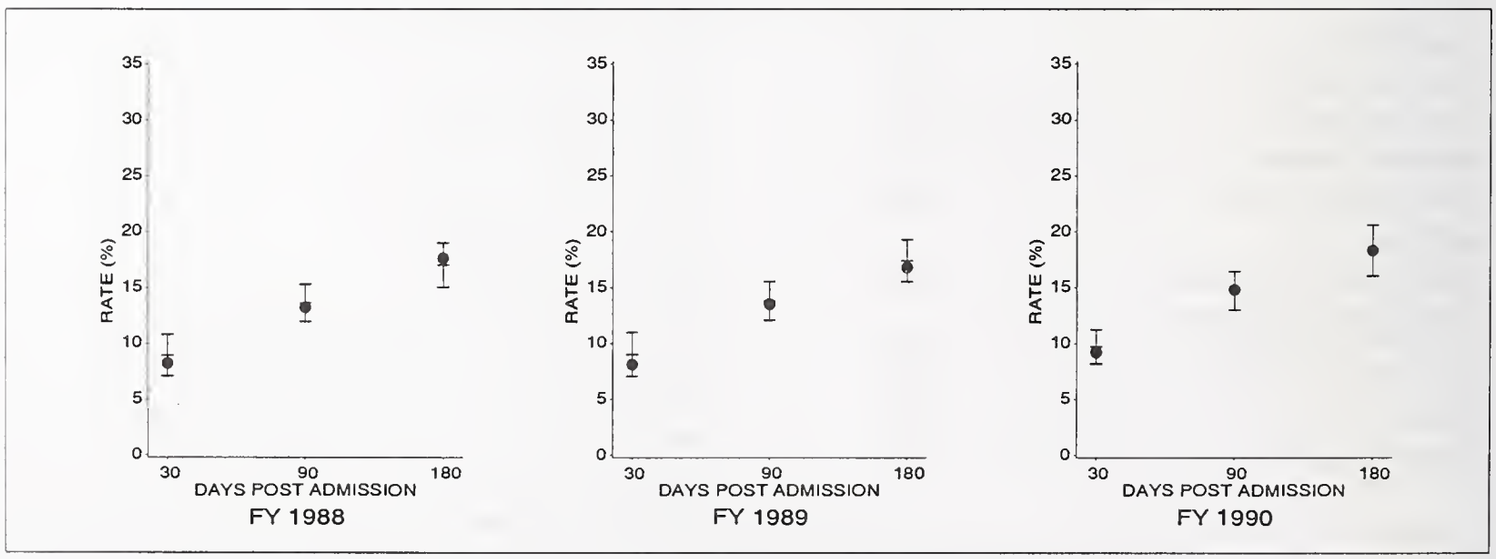
POCONO RD
DENVILLE, NJ 07834
Medicare Provider Number: 310050

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2289	9.2	9.7	0.8	14.8	14.7	0.9	18.3	18.3	1.1
CONDITIONS:										
Acute Myocardial Infarction	58	36.2	30.3	8.6	37.9	33.5	8.6	37.9	36.0	8.2
Congestive Heart Failure	148	12.2	14.8	3.2	23.6	23.3	3.6	32.4	29.5	4.1
Pneumonia/Influenza	107	12.1	17.9	6.7	16.8	24.2	7.8	18.7	28.2	8.3
Chronic Obstructive Pulmonary Disease	23	4.3	14.5	-----	13.0	23.4	-----	17.4	29.0	-----
Transient Cerebral Ischemia	57	1.8	2.1	2.0	3.5	4.8	3.0	5.3	7.8	4.1
Stroke	80	12.5	20.7	6.8	18.7	26.9	6.9	22.5	30.5	7.1
Hip Fracture	52	1.9	6.9	4.7	1.9	11.8	7.2	9.6	15.1	6.8
Sepsis	39	23.1	23.6	-----	30.8	31.1	-----	35.9	35.6	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	11	0.0	2.4	-----	9.1	5.0	-----	9.1	7.4	-----
Carotid Endarterectomy	5	0.0	1.6	-----	20.0	2.9	-----	20.0	4.1	-----
Hip Replacement/Reconstruction	29	0.0	3.5	-----	3.4	6.4	-----	3.4	8.6	-----
Open Reduction of Hip Fracture	30	3.3	6.9	-----	3.3	12.1	-----	13.3	15.6	-----
Prostatectomy	98	1.0	1.0	1.0	1.0	2.2	2.0	3.1	3.7	2.0
Cholecystectomy	33	9.1	3.2	-----	9.1	5.1	-----	9.1	6.4	-----
Hysterectomy	13	7.7	1.8	-----	15.4	4.2	-----	15.4	6.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST CLARES RIVERSIDE MEDICAL CENTER

Medicare Provider Number: 310050

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.8 years
Proportion female	57.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	0.2 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	26.8 %
Admitted for emergency	59.0 %

COMORBIDITIES:

Cancer	8.7 %
Chronic cardiovascular disease	36.2 %
Chronic liver disease	1.1 %
Chronic renal disease	1.1 %
Chronic pulmonary disease	12.3 %
Cerebrovascular degeneration	4.5 %
Diabetes mellitus	5.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	78.8%
State	15.6%
Outside State	5.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.7 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	391
Occupancy Rate	80.0 %
Ownership/Control	Church
Medicare Discharges	27.8 %
Case Mix Index (CMI)	1.2109

STAFFING:

Total Number of Physicians	309
Percent of Physicians Board Certified Specialists	60.2 %
Medical Residents/Interns	0
Registered Nurses	249
Licensed Practical Nurses	77

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

ST ELIZABETH HOSPITAL

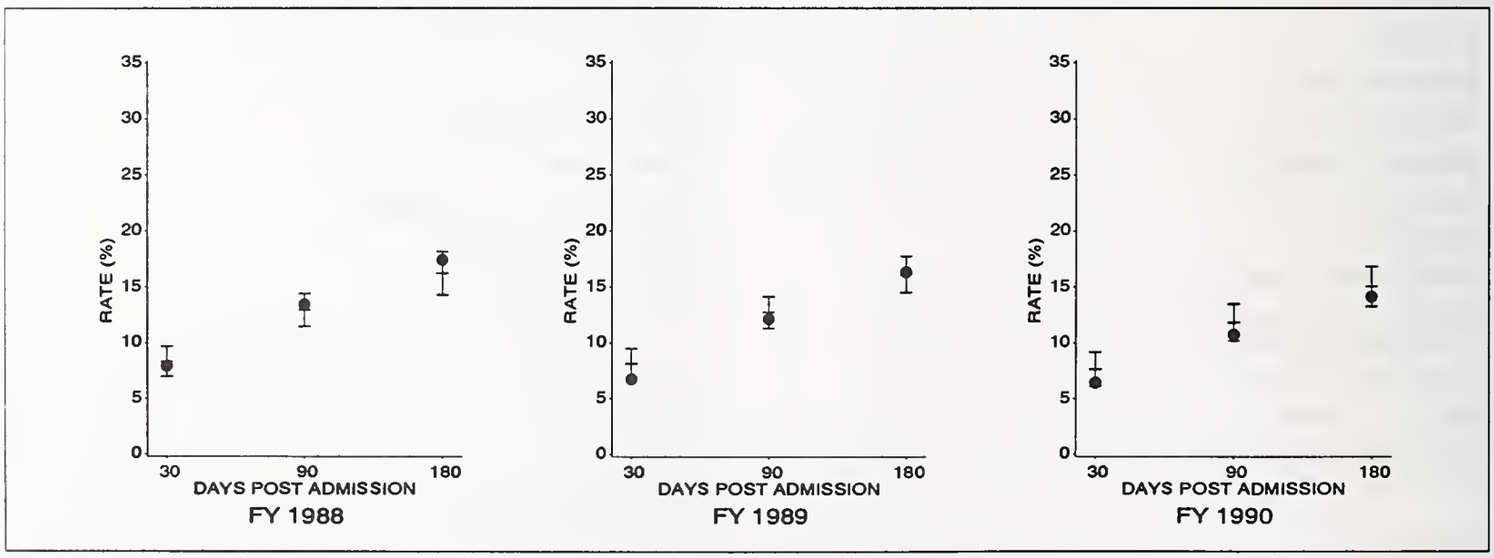
225 WILLIAMSON ST
ELIZABETH, NJ 07207
Medicare Provider Number: 310072

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2625	6.4	7.6	0.8	10.7	11.8	0.8	14.1	15.0	0.9
CONDITIONS:										
Acute Myocardial Infarction	67	22.4	27.8	9.2	25.4	30.8	8.6	26.9	33.2	9.0
Congestive Heart Failure	161	5.6	11.0	4.0	11.2	18.1	5.0	18.6	23.6	4.5
Pneumonia/Influenza	100	14.0	15.4	3.9	21.0	21.0	4.1	22.0	24.9	4.7
Chronic Obstructive Pulmonary Disease	38	15.8	9.0	-----	26.3	15.8	-----	28.9	20.9	-----
Transient Cerebral Ischemia	55	0.0	2.5	3.5	1.8	5.4	5.4	5.5	8.3	6.0
Stroke	101	19.8	20.4	4.5	26.7	26.5	5.5	29.7	30.1	5.9
Hip Fracture	38	5.3	7.3	-----	5.3	13.0	-----	13.2	16.8	-----
Sepsis	16	12.5	21.9	-----	18.8	29.1	-----	25.0	33.3	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	29	3.4	2.9	-----	6.9	5.1	-----	6.9	7.2	-----
Carotid Endarterectomy	7	0.0	1.3	-----	0.0	2.3	-----	0.0	3.5	-----
Hip Replacement/Reconstruction	23	8.7	5.8	-----	8.7	10.8	-----	13.0	14.2	-----
Open Reduction of Hip Fracture	22	0.0	5.5	-----	0.0	10.3	-----	4.5	13.6	-----
Prostatectomy	63	0.0	0.8	1.5	0.0	1.7	3.2	4.8	3.0	3.3
Cholecystectomy	29	3.4	2.1	-----	10.3	3.7	-----	10.3	5.0	-----
Hysterectomy	16	0.0	0.9	-----	6.3	1.8	-----	6.3	2.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST ELIZABETH HOSPITAL

Medicare Provider Number: 310072

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.8 years
Proportion female	55.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	45.2 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	45.4 %
Admitted for emergency	52.5 %

COMORBIDITIES:

Cancer	7.1 %
Chronic cardiovascular disease	40.6 %
Chronic liver disease	1.7 %
Chronic renal disease	3.8 %
Chronic pulmonary disease	14.7 %
Cerebrovascular degeneration	1.6 %
Diabetes mellitus	9.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	84.4%
State	13.6%
Outside State	2.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.7 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	331
Occupancy Rate	81.0 %
Ownership/Control	Church
Medicare Discharges	35.7 %
Case Mix Index (CMI)	1.1741

STAFFING:

Total Number of Physicians	342
Percent of Physicians Board Certified Specialists	57.6 %
Medical Residents/Interns	33
Registered Nurses	208
Licensed Practical Nurses	68

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

ST FRANCIS COMMUNITY HEALTH CENTER

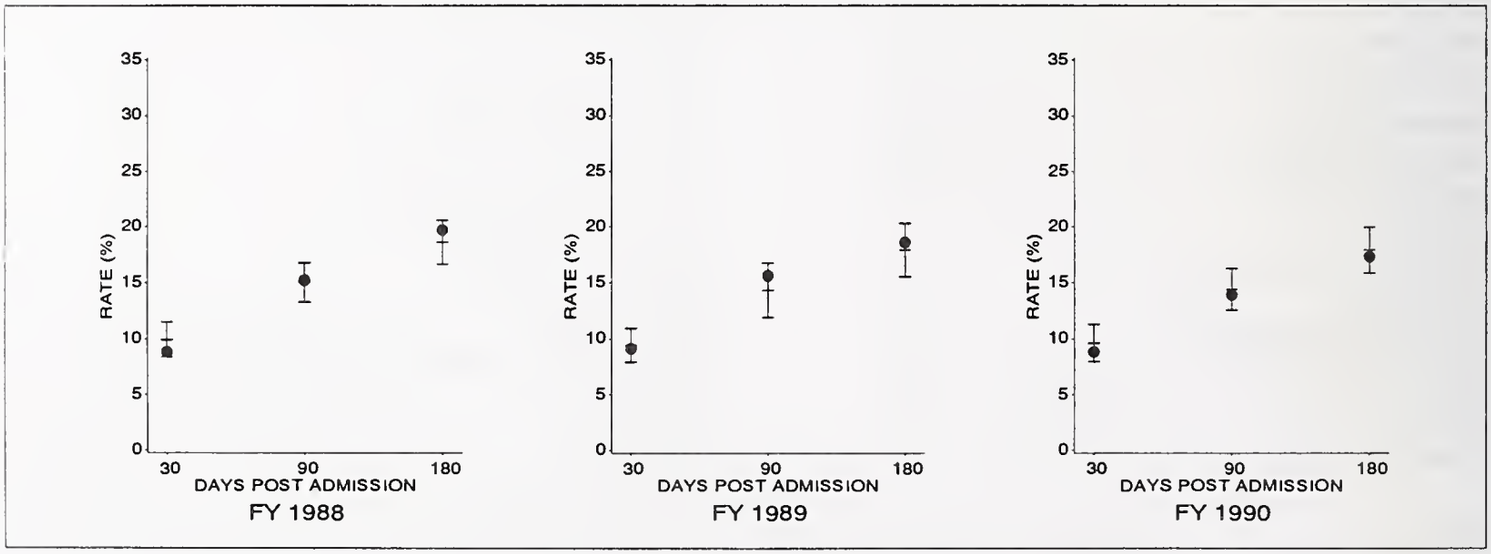
25 WILLIAMS PL
JERSEY CITY, NJ 07302
Medicare Provider Number: 310049

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1512	8.8	9.6	0.8	13.9	14.4	0.9	17.3	17.9	1.0
CONDITIONS:										
Acute Myocardial Infarction	41	31.7	29.1	-----	31.7	32.0	-----	39.0	34.6	-----
Congestive Heart Failure	95	11.6	16.1	5.3	24.2	25.3	4.7	31.6	31.9	5.0
Pneumonia/Influenza	47	10.6	15.8	-----	14.9	21.2	-----	17.0	24.7	-----
Chronic Obstructive Pulmonary Disease	46	10.9	10.0	-----	13.0	16.1	-----	13.0	20.6	-----
Transient Cerebral Ischemia	46	2.2	2.0	-----	2.2	4.4	-----	8.7	7.2	-----
Stroke	62	22.6	21.4	6.1	30.6	27.6	6.3	33.9	31.3	7.8
Hip Fracture	19	5.3	8.8	-----	15.8	15.4	-----	15.8	19.2	-----
Sepsis	12	25.0	27.9	-----	58.3	37.4	-----	58.3	42.7	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	16	0.0	5.3	-----	0.0	9.6	-----	6.3	12.6	-----
Carotid Endarterectomy	4	25.0	1.8	-----	25.0	3.5	-----	25.0	5.2	-----
Hip Replacement/Reconstruction	17	5.9	4.1	-----	11.8	7.6	-----	11.8	9.8	-----
Open Reduction of Hip Fracture	8	0.0	9.3	-----	12.5	16.5	-----	12.5	21.0	-----
Prostatectomy	73	0.0	0.9	2.2	1.4	2.1	2.7	1.4	3.6	3.9
Cholecystectomy	35	2.9	2.9	-----	5.7	5.2	-----	5.7	6.6	-----
Hysterectomy	6	0.0	0.7	-----	0.0	1.5	-----	0.0	2.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST FRANCIS COMMUNITY HEALTH CENTER

Medicare Provider Number: 310049

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.5 years
Proportion female	59.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	43.0 %
Transferred from skilled nursing facility	0.7 %
Admitted for elective procedure	16.9 %
Admitted for emergency	59.7 %

COMORBIDITIES:

Cancer	7.2 %
Chronic cardiovascular disease	46.9 %
Chronic liver disease	1.3 %
Chronic renal disease	1.9 %
Chronic pulmonary disease	17.9 %
Cerebrovascular degeneration	3.0 %
Diabetes mellitus	13.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	95.1%
State	3.6%
Outside State	1.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	13.5 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	254
Occupancy Rate	70.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	34.7 %
Case Mix Index (CMI)	1.2519

STAFFING:

Total Number of Physicians	249
Percent of Physicians Board Certified Specialists	37.8 %
Medical Residents/Interns	0
Registered Nurses	125
Licensed Practical Nurses	49

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

ST FRANCIS MEDICAL CENTER

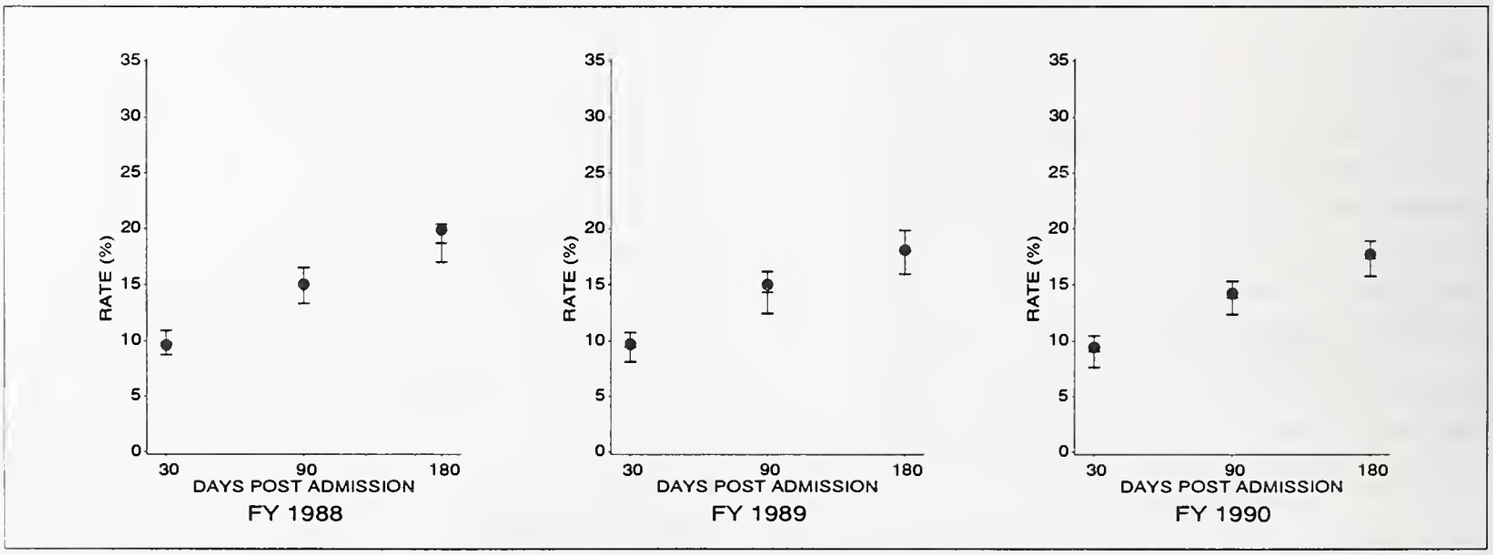
601 HAMILTON AVE
TRENTON, NJ 08629
Medicare Provider Number: 310021

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2879	9.4	9.0	0.7	14.2	13.8	0.7	17.7	17.3	0.8
CONDITIONS:										
Acute Myocardial Infarction	87	24.1	27.2	8.2	26.4	30.3	7.3	31.0	33.0	7.1
Congestive Heart Failure	169	13.6	14.8	3.0	21.9	23.4	5.2	27.8	29.4	5.5
Pneumonia/Influenza	94	22.3	18.7	6.5	28.7	25.2	5.5	31.9	29.5	5.6
Chronic Obstructive Pulmonary Disease	43	11.6	10.0	-----	20.9	16.6	-----	25.6	21.2	-----
Transient Cerebral Ischemia	102	1.0	2.1	1.8	2.0	4.4	3.0	3.9	6.9	3.7
Stroke	114	24.6	20.9	4.8	28.9	27.4	4.3	34.2	31.2	5.0
Hip Fracture	40	2.5	7.3	-----	10.0	13.3	-----	12.5	17.2	-----
Sepsis	17	58.8	32.1	-----	70.6	39.8	-----	70.6	44.2	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	34	8.8	3.7	-----	8.8	6.4	-----	11.8	9.0	-----
Carotid Endarterectomy	17	0.0	2.0	-----	0.0	3.5	-----	0.0	5.1	-----
Hip Replacement/Reconstruction	22	4.5	3.6	-----	4.5	7.2	-----	9.1	9.9	-----
Open Reduction of Hip Fracture	20	0.0	6.6	-----	10.0	12.0	-----	15.0	15.5	-----
Prostatectomy	129	0.8	1.0	0.9	1.6	2.4	1.7	3.1	4.1	2.2
Cholecystectomy	47	6.4	3.4	-----	10.6	6.7	-----	10.6	9.1	-----
Hysterectomy	16	0.0	0.3	-----	0.0	0.7	-----	0.0	1.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST FRANCIS MEDICAL CENTER

Medicare Provider Number: 310021

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.3 years
Proportion female	53.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	41.2 %
Transferred from skilled nursing facility	0.5 %
Admitted for elective procedure	27.8 %
Admitted for emergency	69.1 %

COMORBIDITIES:

Cancer	8.5 %
Chronic cardiovascular disease	41.1 %
Chronic liver disease	1.2 %
Chronic renal disease	2.6 %
Chronic pulmonary disease	15.7 %
Cerebrovascular degeneration	2.8 %
Diabetes mellitus	9.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	88.2%
State	8.1%
Outside State	3.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.4 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	388
Occupancy Rate	69.0 %
Ownership/Control	Church
Medicare Discharges	38.0 %
Case Mix Index (CMI)	1.2191

STAFFING:

Total Number of Physicians	227
Percent of Physicians Board Certified Specialists	65.2 %
Medical Residents/Interns	46
Registered Nurses	218
Licensed Practical Nurses	82

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

ST JAMES HOSPITAL

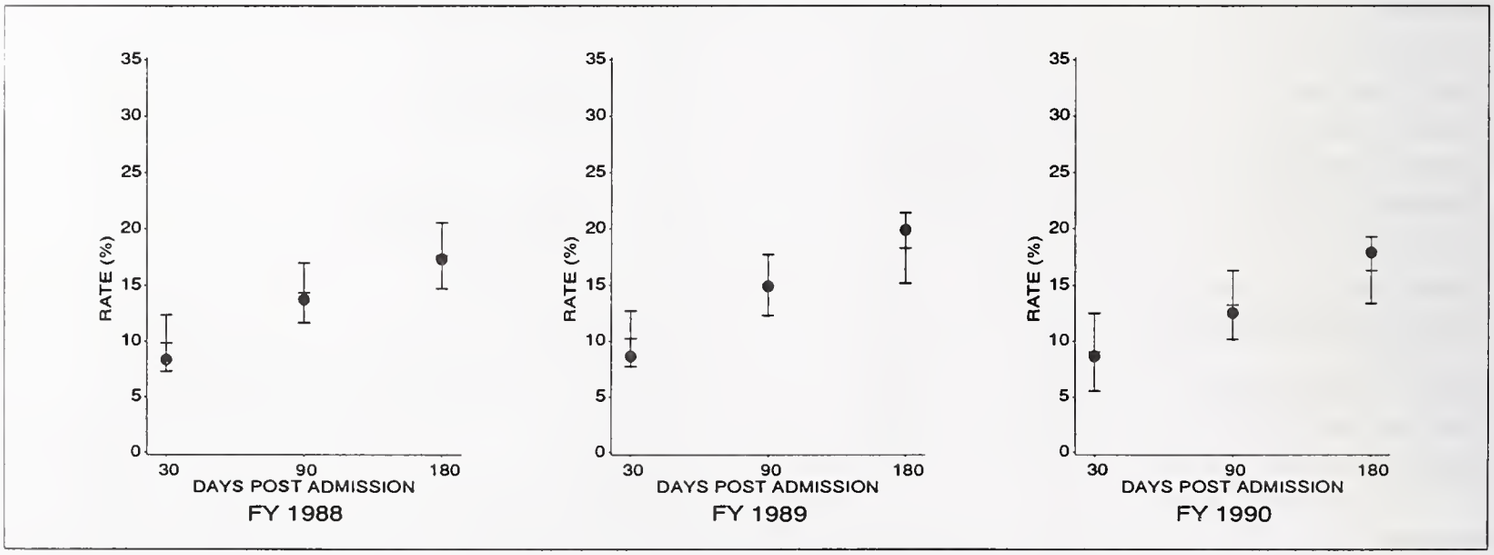
155 JEFFERSON ST
NEWARK, NJ 07105
Medicare Provider Number: 310018

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	666	8.6	9.0	1.7	12.5	13.2	1.5	17.9	16.3	1.5
CONDITIONS:										
Acute Myocardial Infarction	11	45.5	29.4	-----	54.5	31.9	-----	54.5	34.9	-----
Congestive Heart Failure	71	11.3	12.9	4.5	12.7	21.2	7.2	25.4	27.4	5.6
Pneumonia/Influenza	41	12.2	13.7	-----	14.6	18.3	-----	19.5	21.5	-----
Chronic Obstructive Pulmonary Disease	11	9.1	10.5	-----	27.3	17.3	-----	36.4	22.2	-----
Transient Cerebral Ischemia	9	0.0	1.3	-----	0.0	3.2	-----	11.1	5.5	-----
Stroke	32	40.6	19.4	-----	53.1	24.8	-----	56.3	28.4	-----
Hip Fracture	3	33.3	6.7	-----	33.3	11.9	-----	33.3	16.2	-----
Sepsis	5	0.0	43.5	-----	40.0	52.3	-----	60.0	56.2	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	5	20.0	10.8	-----	20.0	17.3	-----	40.0	21.8	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	3	0.0	5.0	-----	0.0	11.2	-----	0.0	17.0	-----
Open Reduction of Hip Fracture	0									
Prostatectomy	25	0.0	1.0	-----	0.0	2.4	-----	0.0	4.0	-----
Cholecystectomy	12	0.0	1.5	-----	0.0	3.0	-----	0.0	4.3	-----
Hysterectomy	8	0.0	0.2	-----	0.0	0.3	-----	0.0	0.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST JAMES HOSPITAL
Medicare Provider Number: 310018

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.0 years
Proportion female	49.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	40.4 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	14.9 %
Admitted for emergency	56.8 %

COMORBIDITIES:

Cancer	4.5 %
Chronic cardiovascular disease	28.4 %
Chronic liver disease	1.2 %
Chronic renal disease	2.9 %
Chronic pulmonary disease	12.0 %
Cerebrovascular degeneration	2.7 %
Diabetes mellitus	8.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	85.4%
State	11.2%
Outside State	3.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	15.7 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	189
Occupancy Rate	71.0 %
Ownership/Control	Church
Medicare Discharges	23.3 %
Case Mix Index (CMI)	1.1097

STAFFING:

Total Number of Physicians	105
Percent of Physicians Board Certified Specialists	57.1 %
Medical Residents/Interns	0
Registered Nurses	108
Licensed Practical Nurses	24

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

ST JOSEPHS HOSPITAL

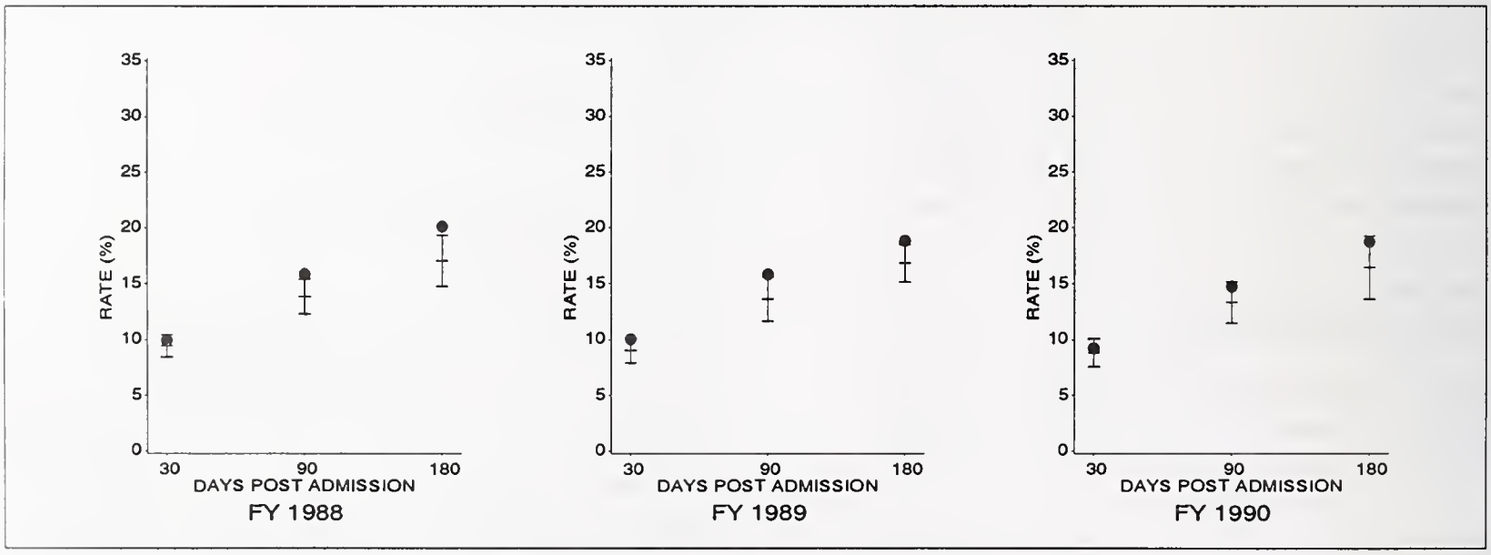
703 MAIN ST
PATERSON, NJ 07503
Medicare Provider Number: 310019

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3399	9.2	8.8	0.6	14.7	13.3	0.9	18.7	16.4	1.4
CONDITIONS:										
Acute Myocardial Infarction	83	22.9	27.3	5.6	22.9	30.8	5.7	24.1	33.6	6.2
Congestive Heart Failure	146	13.7	14.9	4.5	20.5	23.1	3.9	30.1	29.2	3.9
Pneumonia/Influenza	95	23.2	15.7	5.6	29.5	21.5	6.0	34.7	25.1	6.4
Chronic Obstructive Pulmonary Disease	42	7.1	8.7	-----	14.3	14.9	-----	19.0	19.3	-----
Transient Cerebral Ischemia	58	1.7	1.5	2.4	5.2	3.3	4.5	12.1	5.4	6.8
Stroke	104	24.0	19.7	5.6	28.8	26.1	6.2	32.7	29.7	7.1
Hip Fracture	54	18.5	6.9	6.1	20.4	12.1	7.9	25.9	15.6	7.2
Sepsis	30	40.0	27.7	-----	53.3	37.7	-----	56.7	42.8	-----
PROCEDURES:										
Angioplasty	116	2.6	2.4	1.5	2.6	3.3	1.7	3.4	4.2	2.2
Coronary Artery Bypass Graft	176	9.1	6.4	2.0	16.5	9.5	3.1	18.7	10.9	3.2
Initial Pacemaker Insertion	27	7.4	2.5	-----	7.4	5.0	-----	7.4	7.3	-----
Carotid Endarterectomy	3	0.0	3.2	-----	0.0	5.6	-----	0.0	7.5	-----
Hip Replacement/Reconstruction	30	13.3	4.2	-----	13.3	7.4	-----	23.3	9.5	-----
Open Reduction of Hip Fracture	27	7.4	6.0	-----	11.1	11.1	-----	11.1	14.9	-----
Prostatectomy	76	3.9	0.9	2.4	7.9	2.2	3.7	10.5	3.7	3.9
Cholecystectomy	42	7.1	4.7	-----	9.5	8.8	-----	16.7	11.5	-----
Hysterectomy	19	0.0	0.4	-----	0.0	1.0	-----	5.3	1.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST JOSEPHS HOSPITAL
Medicare Provider Number: 310019

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	71.3 years
Proportion female	52.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	42.2 %
Transferred from skilled nursing facility	1.1 %
Admitted for elective procedure	26.5 %
Admitted for emergency	51.7 %

COMORBIDITIES:

Cancer	6.2 %
Chronic cardiovascular disease	37.3 %
Chronic liver disease	0.8 %
Chronic renal disease	7.1 %
Chronic pulmonary disease	7.4 %
Cerebrovascular degeneration	2.7 %
Diabetes mellitus	7.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	67.6%
State	29.3%
Outside State	3.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.8 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	702
Occupancy Rate	90.0 %
Ownership/Control	Church
Medicare Discharges	28.2 %
Case Mix Index (CMI)	1.5381

STAFFING:

Total Number of Physicians	423
Percent of Physicians Board Certified Specialists	72.1 %
Medical Residents/Interns	131
Registered Nurses	595
Licensed Practical Nurses	120

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	Yes

*** Not used in calculating mortality rates**

ST MARYS HOSPITAL

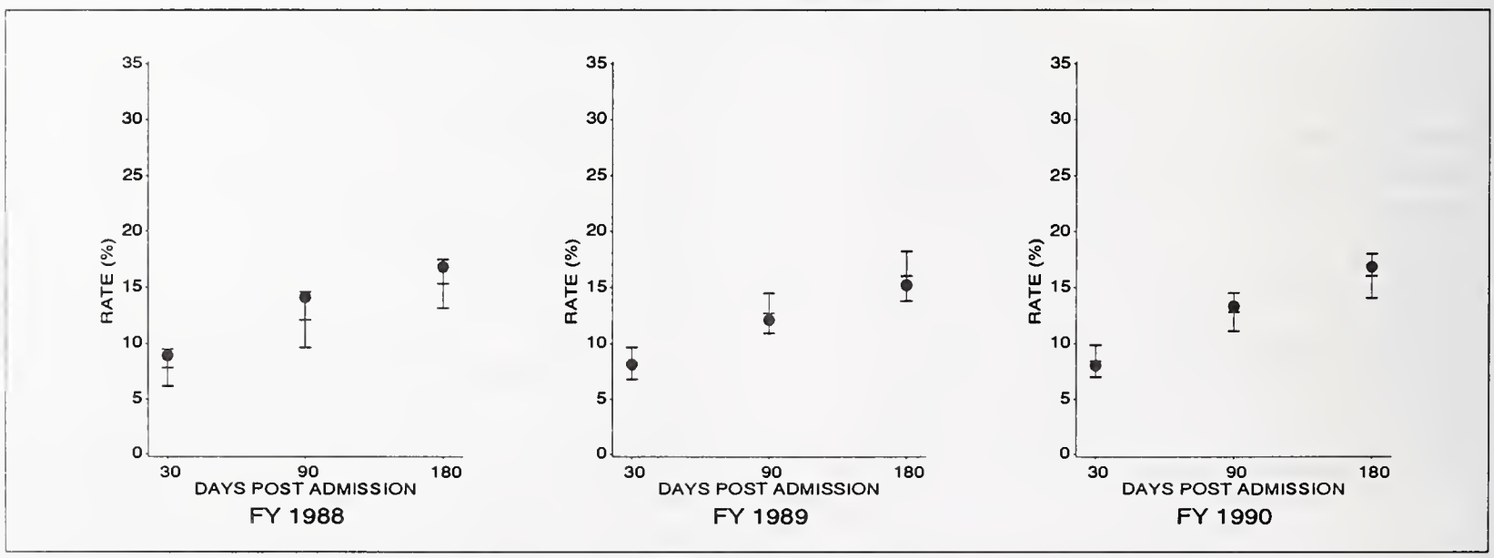
211 PENNINGTON AVE
PASSAIC, NJ 07055
Medicare Provider Number: 310006

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1831	8.0	8.4	0.7	13.3	12.8	0.9	16.8	16.0	1.0
CONDITIONS:										
Acute Myocardial Infarction	38	36.8	36.7	-----	42.1	39.4	-----	44.7	42.0	-----
Congestive Heart Failure	117	13.7	14.1	3.3	22.2	22.4	4.2	29.1	28.3	4.2
Pneumonia/Influenza	54	20.4	18.1	6.1	24.1	23.9	5.8	29.6	27.5	6.3
Chronic Obstructive Pulmonary Disease	15	13.3	7.2	-----	13.3	12.2	-----	20.0	16.1	-----
Transient Cerebral Ischemia	36	2.8	2.5	-----	2.8	5.5	-----	5.6	8.5	-----
Stroke	92	20.7	19.1	4.4	34.8	26.2	6.5	38.0	30.0	6.8
Hip Fracture	39	15.4	6.5	-----	20.5	11.7	-----	25.6	15.2	-----
Sepsis	13	15.4	22.9	-----	23.1	30.8	-----	30.8	35.3	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	5	0.0	1.8	-----	0.0	3.7	-----	0.0	5.9	-----
Carotid Endarterectomy	6	0.0	1.1	-----	0.0	2.0	-----	0.0	3.0	-----
Hip Replacement/Reconstruction	25	4.0	3.4	-----	4.0	6.4	-----	8.0	8.5	-----
Open Reduction of Hip Fracture	17	11.8	6.3	-----	17.6	11.6	-----	17.6	15.1	-----
Prostatectomy	101	1.0	1.3	1.2	4.0	3.0	2.0	5.9	5.1	2.8
Cholecystectomy	36	0.0	2.9	-----	5.6	5.2	-----	8.3	6.7	-----
Hysterectomy	9	0.0	1.5	-----	11.1	3.3	-----	11.1	4.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST MARYS HOSPITAL
Medicare Provider Number: 310006

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.4 years
Proportion female	54.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	43.9 %
Transferred from skilled nursing facility	0.4 %
Admitted for elective procedure	27.9 %
Admitted for emergency	58.3 %

COMORBIDITIES:

Cancer	7.4 %
Chronic cardiovascular disease	38.4 %
Chronic liver disease	1.1 %
Chronic renal disease	2.0 %
Chronic pulmonary disease	11.6 %
Cerebrovascular degeneration	2.5 %
Diabetes mellitus	9.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	49.5%
State	49.0%
Outside State	1.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	12.2 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	226
Occupancy Rate	69.0 %
Ownership/Control	Church
Medicare Discharges	50.3 %
Case Mix Index (CMI)	1.1575

STAFFING:

Total Number of Physicians	255
Percent of Physicians Board Certified Specialists	53.3 %
Medical Residents/Interns	0
Registered Nurses	201
Licensed Practical Nurses	0

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

ST MARYS HOSPITAL

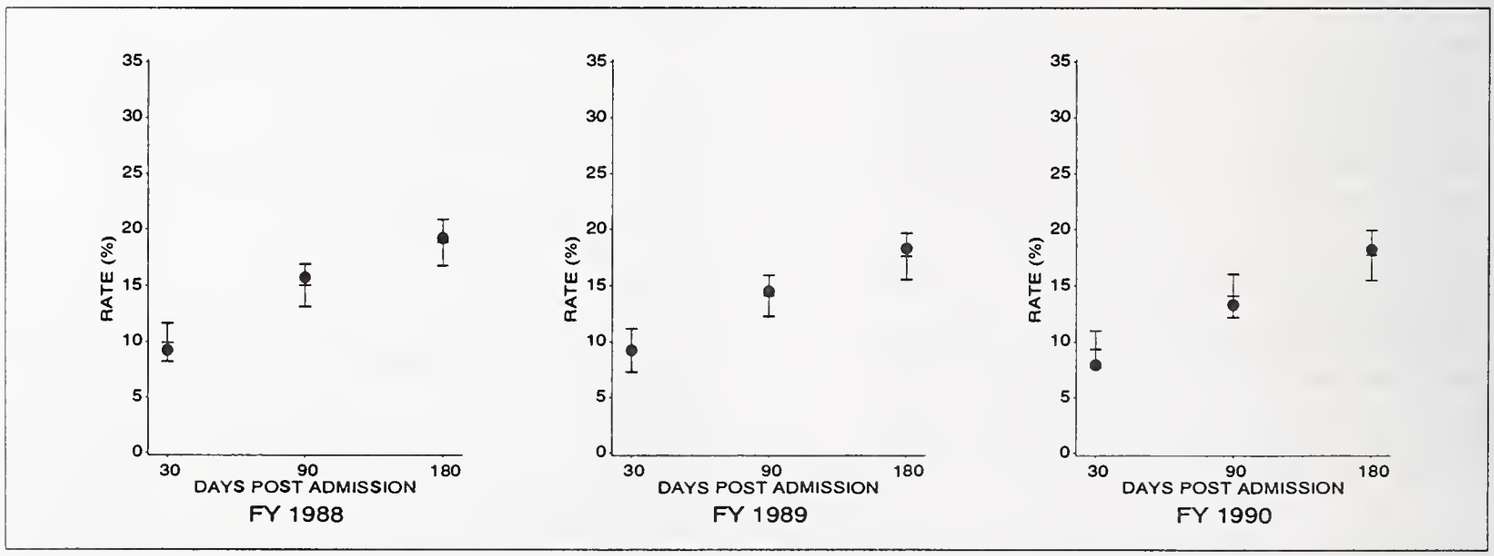
308 WILLOW AVE
HOBOKEN, NJ 07030
Medicare Provider Number: 310040

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1566	7.9	9.3	0.8	13.3	14.1	1.0	18.2	17.7	1.1
CONDITIONS:										
Acute Myocardial Infarction	39	25.6	30.6	-----	30.8	33.1	-----	30.8	36.1	-----
Congestive Heart Failure	71	15.5	15.2	4.3	19.7	24.1	7.2	28.2	30.2	8.3
Pneumonia/Influenza	59	11.9	17.5	5.5	22.0	23.4	5.8	35.6	27.2	7.1
Chronic Obstructive Pulmonary Disease	46	10.9	10.7	-----	17.4	17.8	-----	19.6	22.4	-----
Transient Cerebral Ischemia	63	0.0	2.3	2.5	0.0	5.1	4.8	6.3	8.0	3.9
Stroke	52	17.3	20.7	7.4	23.1	27.4	6.6	30.8	31.2	6.5
Hip Fracture	25	4.0	6.6	-----	8.0	12.0	-----	12.0	16.0	-----
Sepsis	18	38.9	34.6	-----	44.4	43.7	-----	61.1	49.3	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	11	0.0	2.7	-----	0.0	5.6	-----	0.0	8.0	-----
Carotid Endarterectomy	14	0.0	2.2	-----	0.0	3.9	-----	14.3	5.6	-----
Hip Replacement/Reconstruction	11	0.0	4.2	-----	0.0	7.6	-----	0.0	9.9	-----
Open Reduction of Hip Fracture	16	6.3	6.4	-----	12.5	12.0	-----	12.5	16.2	-----
Prostatectomy	82	2.4	1.3	1.6	3.7	3.0	2.0	8.5	5.0	3.9
Cholecystectomy	24	4.2	1.6	-----	12.5	3.2	-----	12.5	4.4	-----
Hysterectomy	10	0.0	1.3	-----	0.0	3.1	-----	10.0	5.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST MARYS HOSPITAL
Medicare Provider Number: 310040

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	73.5 years
Proportion female	51.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	37.0 %
Transferred from skilled nursing facility	1.7 %
Admitted for elective procedure	18.4 %
Admitted for emergency	58.2 %

COMORBIDITIES:

Cancer	7.5 %
Chronic cardiovascular disease	40.6 %
Chronic liver disease	1.1 %
Chronic renal disease	3.7 %
Chronic pulmonary disease	30.8 %
Cerebrovascular degeneration	2.7 %
Diabetes mellitus	9.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	90.4%
State	7.2%
Outside State	2.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	14.0 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	330
Occupancy Rate	72.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	31.3 %
Case Mix Index (CMI)	1.1927

STAFFING:

Total Number of Physicians	306
Percent of Physicians Board Certified Specialists	40.8 %
Medical Residents/Interns	27
Registered Nurses	126
Licensed Practical Nurses	30

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

ST MARYS HOSPITAL

135 S CENTER ST
ORANGE, NJ 07050
Medicare Provider Number: 310071

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1	0.0	3.2	-----	0.0	9.4	-----	0.0	18.0	-----
CONDITIONS:										
Acute Myocardial Infarction	0									
Congestive Heart Failure	0									
Pneumonia/Influenza	0									
Chronic Obstructive Pulmonary Disease	0									
Transient Cerebral Ischemia	0									
Stroke	0									
Hip Fracture	0									
Sepsis	0									
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	0									
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	0									
Open Reduction of Hip Fracture	0									
Prostatectomy	0									
Cholecystectomy	0									
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

ST MARYS HOSPITAL
Medicare Provider Number: 310071

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	54.0 years
Proportion female	100.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	100.0 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	100.0 %
Admitted for emergency	0.0 %

COMORBIDITIES:

Cancer	100.0 %
Chronic cardiovascular disease	0.0 %
Chronic liver disease	0.0 %
Chronic renal disease	0.0 %
Chronic pulmonary disease	0.0 %
Cerebrovascular degeneration	0.0 %
Diabetes mellitus	0.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	0.0%
State	100.0%
Outside State	0.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	1.0 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1989

PROFILE:

Total Beds	202
Ownership/Control	Church
Case Mix Index (CMI)	0.5052

STAFFING:

Medical Residents/Interns	0
Registered Nurses	113
Licensed Practical Nurses	47

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	No
Hospice Care	No
Intensive Care Unit	Yes
Organ Transplant	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	Yes
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

ST MICHAELS MEDICAL CENTER

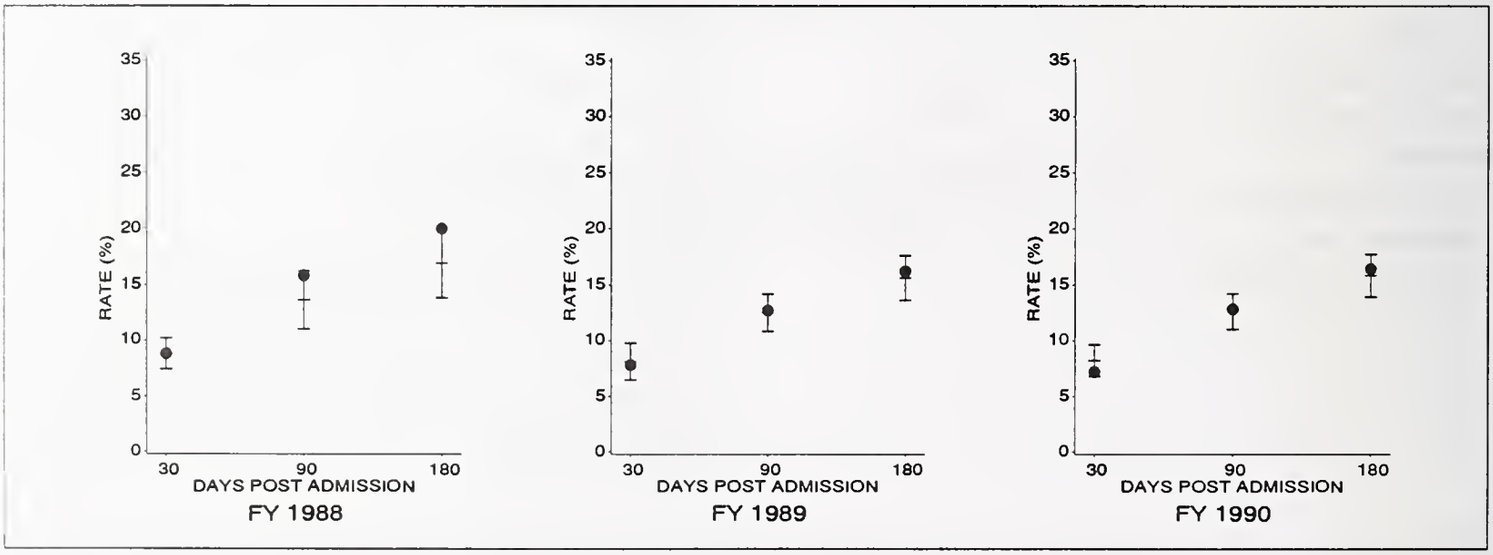
306 HIGH STREET
NEWARK, NJ 07102
Medicare Provider Number: 310096

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1857	7.2	8.2	0.7	12.8	12.6	0.8	16.4	15.8	1.0
CONDITIONS:										
Acute Myocardial Infarction	43	11.6	22.9	-----	20.9	25.5	-----	20.9	28.1	-----
Congestive Heart Failure	79	12.7	13.4	4.7	19.0	21.8	9.8	27.8	27.9	7.7
Pneumonia/Influenza	80	17.5	17.3	4.3	28.7	24.0	6.3	32.5	28.0	6.4
Chronic Obstructive Pulmonary Disease	10	0.0	10.1	-----	10.0	18.1	-----	20.0	24.0	-----
Transient Cerebral Ischemia	17	5.9	1.8	-----	11.8	4.1	-----	11.8	6.5	-----
Stroke	38	13.2	22.4	-----	28.9	28.2	-----	28.9	31.5	-----
Hip Fracture	11	0.0	6.2	-----	9.1	10.9	-----	9.1	14.1	-----
Sepsis	28	28.6	24.7	-----	35.7	35.5	-----	50.0	41.4	-----
PROCEDURES:										
Angioplasty	116	0.9	2.1	1.7	2.6	3.0	1.8	2.6	3.9	2.2
Coronary Artery Bypass Graft	102	9.8	5.5	3.9	9.8	8.3	2.9	13.7	9.7	3.8
Initial Pacemaker Insertion	12	0.0	4.5	-----	0.0	9.2	-----	16.7	12.9	-----
Carotid Endarterectomy	10	0.0	1.4	-----	0.0	2.6	-----	0.0	3.9	-----
Hip Replacement/Reconstruction	3	0.0	4.5	-----	33.3	9.2	-----	33.3	12.7	-----
Open Reduction of Hip Fracture	8	0.0	4.9	-----	0.0	9.1	-----	0.0	12.0	-----
Prostatectomy	33	0.0	1.1	-----	3.0	2.5	-----	3.0	4.2	-----
Cholecystectomy	7	0.0	2.9	-----	0.0	4.5	-----	0.0	5.5	-----
Hysterectomy	12	0.0	1.2	-----	8.3	2.6	-----	8.3	4.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST MICHAELS MEDICAL CENTER

Medicare Provider Number: 310096

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	70.6 years
Proportion female	52.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	46.1 %
Transferred from skilled nursing facility	3.6 %
Admitted for elective procedure	33.5 %
Admitted for emergency	33.7 %

COMORBIDITIES:

Cancer	5.3 %
Chronic cardiovascular disease	41.3 %
Chronic liver disease	0.6 %
Chronic renal disease	5.7 %
Chronic pulmonary disease	9.2 %
Cerebrovascular degeneration	3.6 %
Diabetes mellitus	10.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	62.6%
State	34.0%
Outside State	3.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	13.9 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	411
Occupancy Rate	78.0 %
Ownership/Control	Church
Medicare Discharges	27.6 %
Case Mix Index (CMI)	1.7036

STAFFING:

Total Number of Physicians	333
Percent of Physicians Board Certified Specialists	61.0 %
Medical Residents/Interns	106
Registered Nurses	238
Licensed Practical Nurses	19

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

ST PETERS MEDICAL CENTER

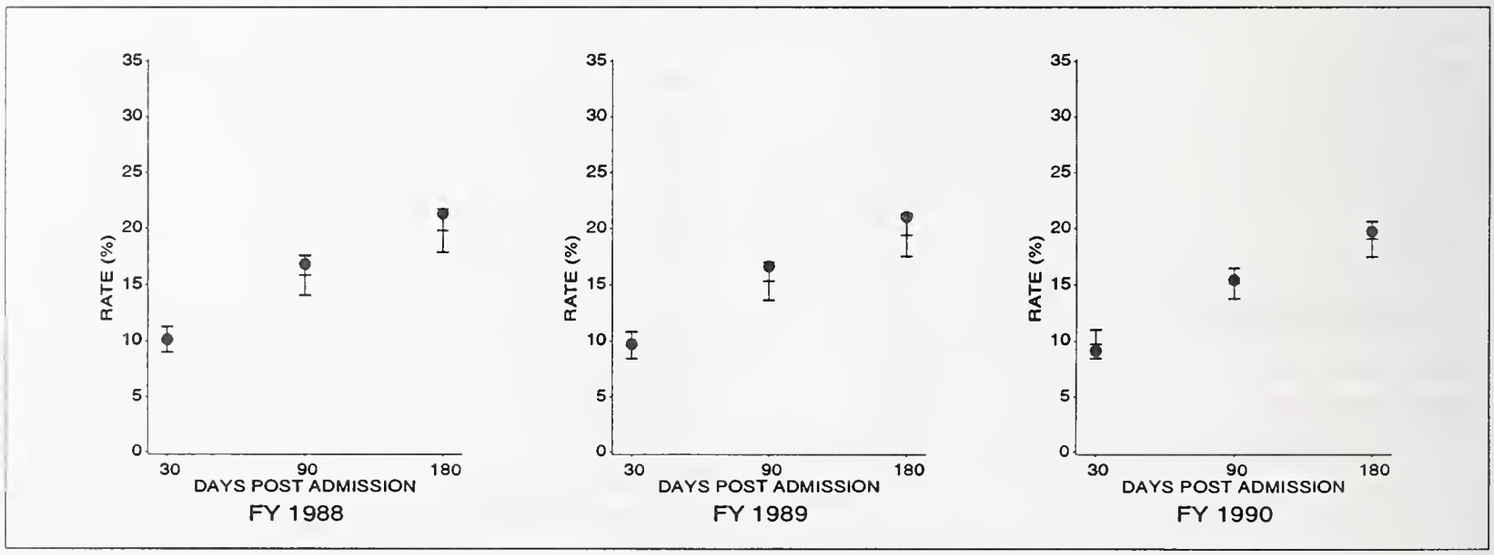
254 EASTON AVE
NEW BRUNSWICK, NJ 08903
Medicare Provider Number: 310070

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3002	9.1	9.7	0.6	15.4	15.1	0.7	19.7	19.0	0.8
CONDITIONS:										
Acute Myocardial Infarction	94	23.4	24.4	7.3	28.7	27.5	7.9	29.8	30.5	6.9
Congestive Heart Failure	113	12.4	15.1	4.1	22.1	23.4	4.8	28.3	29.7	4.5
Pneumonia/Influenza	153	19.0	17.7	3.3	26.1	24.1	3.9	33.3	28.4	5.5
Chronic Obstructive Pulmonary Disease	36	13.9	8.4	-----	19.4	14.8	-----	25.0	19.5	-----
Transient Cerebral Ischemia	41	0.0	1.6	-----	0.0	3.6	-----	2.4	5.9	-----
Stroke	108	20.4	20.8	5.4	27.8	28.2	6.0	31.5	32.3	6.1
Hip Fracture	66	1.5	7.0	4.6	10.6	12.8	4.3	15.2	16.9	5.1
Sepsis	36	30.6	34.3	-----	44.4	46.1	-----	55.6	52.0	-----
PROCEDURES:										
Angioplasty	1	0.0	1.1	-----	0.0	2.2	-----	0.0	2.9	-----
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	19	0.0	2.7	-----	5.3	5.1	-----	5.3	7.4	-----
Carotid Endarterectomy	16	0.0	1.9	-----	6.3	3.9	-----	6.3	5.9	-----
Hip Replacement/Reconstruction	24	0.0	5.9	-----	16.7	10.9	-----	16.7	14.5	-----
Open Reduction of Hip Fracture	38	2.6	6.8	-----	10.5	13.0	-----	18.4	17.5	-----
Prostatectomy	75	0.0	1.3	1.8	0.0	3.0	3.6	2.7	5.1	3.4
Cholecystectomy	58	0.0	2.4	-----	0.0	4.3	-----	1.7	5.7	-----
Hysterectomy	43	0.0	0.6	-----	0.0	1.5	-----	0.0	2.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST PETERS MEDICAL CENTER

Medicare Provider Number: 310070

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.6 years
Proportion female	57.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	30.4 %
Transferred from skilled nursing facility	7.9 %
Admitted for elective procedure	30.2 %
Admitted for emergency	2.7 %

COMORBIDITIES:

Cancer	11.4 %
Chronic cardiovascular disease	37.3 %
Chronic liver disease	1.0 %
Chronic renal disease	3.1 %
Chronic pulmonary disease	10.8 %
Cerebrovascular degeneration	3.1 %
Diabetes mellitus	7.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	74.5%
State	21.8%
Outside State	3.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.4 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	416
Occupancy Rate	94.0 %
Ownership/Control	Church
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.2404

STAFFING:

Total Number of Physicians	516
Percent of Physicians Board Certified Specialists	74.4 %
Medical Residents/Interns	0
Registered Nurses	307
Licensed Practical Nurses	50

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

THE MEDICAL CENTER OF OCEAN COUNTY

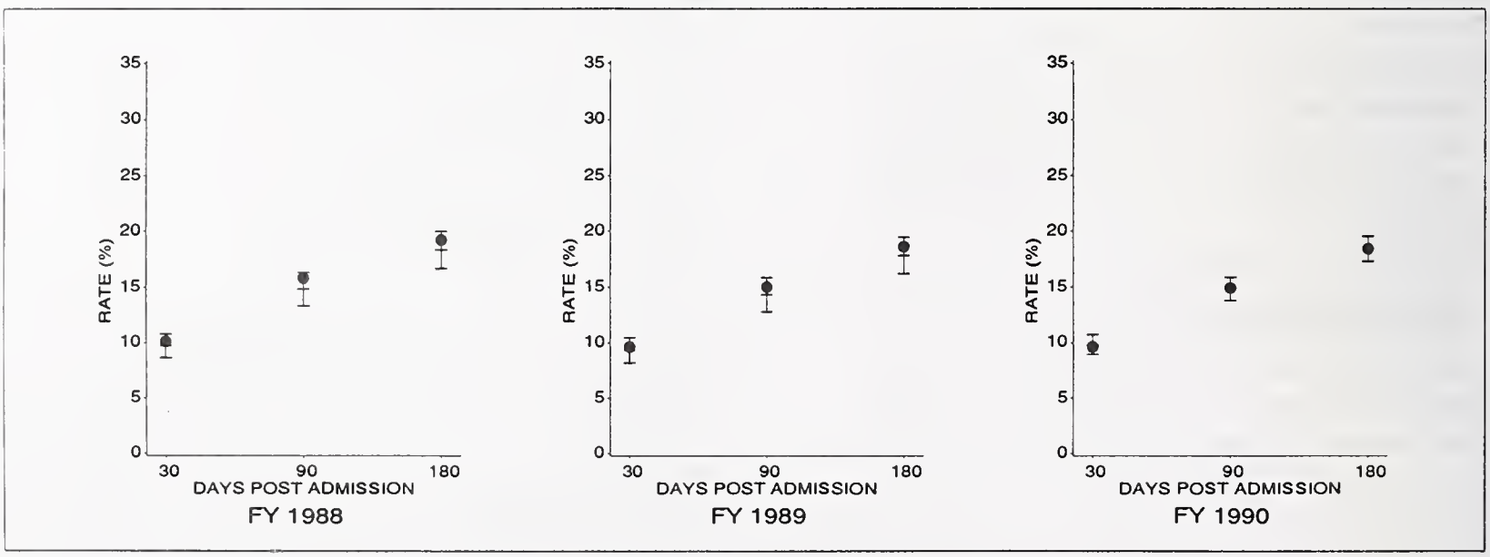
2121 EDGEWATER PLACE
POINT PLEASANT, NJ 08742
Medicare Provider Number: 310052

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	4831	9.6	9.8	0.4	14.9	14.8	0.5	18.4	18.4	0.6
CONDITIONS:										
Acute Myocardial Infarction	158	27.2	29.8	5.6	31.6	32.7	5.3	36.1	35.5	4.6
Congestive Heart Failure	364	15.1	15.4	3.1	21.2	24.2	4.1	27.2	30.5	4.1
Pneumonia/Influenza	192	20.8	18.6	4.8	29.7	25.2	5.8	34.4	29.6	5.8
Chronic Obstructive Pulmonary Disease	107	15.0	9.4	4.7	24.3	16.3	6.8	29.0	21.1	7.2
Transient Cerebral Ischemia	114	1.8	1.9	1.3	3.5	4.2	2.4	6.1	6.9	3.6
Stroke	215	20.5	21.1	3.1	26.5	28.2	4.2	31.2	32.3	5.4
Hip Fracture	133	1.5	6.8	4.2	8.3	12.0	5.0	9.8	15.6	5.7
Sepsis	50	34.0	30.6	-----	48.0	38.8	-----	54.0	43.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	35	5.7	3.0	-----	5.7	5.7	-----	11.4	8.2	-----
Carotid Endarterectomy	52	0.0	1.8	2.4	0.0	3.3	3.7	7.7	4.8	4.1
Hip Replacement/Reconstruction	76	1.3	3.3	2.6	6.6	6.1	2.9	7.9	8.1	3.7
Open Reduction of Hip Fracture	69	2.9	6.8	4.2	8.7	12.2	6.0	10.1	16.1	7.9
Prostatectomy	121	0.0	1.0	1.2	0.0	2.3	2.1	0.0	3.9	3.2
Cholecystectomy	84	1.2	4.1	3.1	4.8	7.8	4.2	6.0	10.5	5.5
Hysterectomy	26	0.0	0.7	-----	0.0	1.5	-----	0.0	2.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



THE MEDICAL CENTER OF OCEAN COUNTY

Medicare Provider Number: 310052

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	76.8 years
Proportion female	56.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	8.7 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	20.9 %
Admitted for emergency	42.5 %

COMORBIDITIES:

Cancer	8.6 %
Chronic cardiovascular disease	38.6 %
Chronic liver disease	0.8 %
Chronic renal disease	2.0 %
Chronic pulmonary disease	12.5 %
Cerebrovascular degeneration	3.0 %
Diabetes mellitus	7.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	80.8%
State	17.0%
Outside State	2.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.3 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	396
Occupancy Rate	86.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	61.7 %
Case Mix Index (CMI)	1.1561

STAFFING:

Total Number of Physicians	305
Percent of Physicians Board Certified Specialists	60.0 %
Medical Residents/Interns	0
Registered Nurses	285
Licensed Practical Nurses	142

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

UNDERWOOD MEMORIAL HOSPITAL

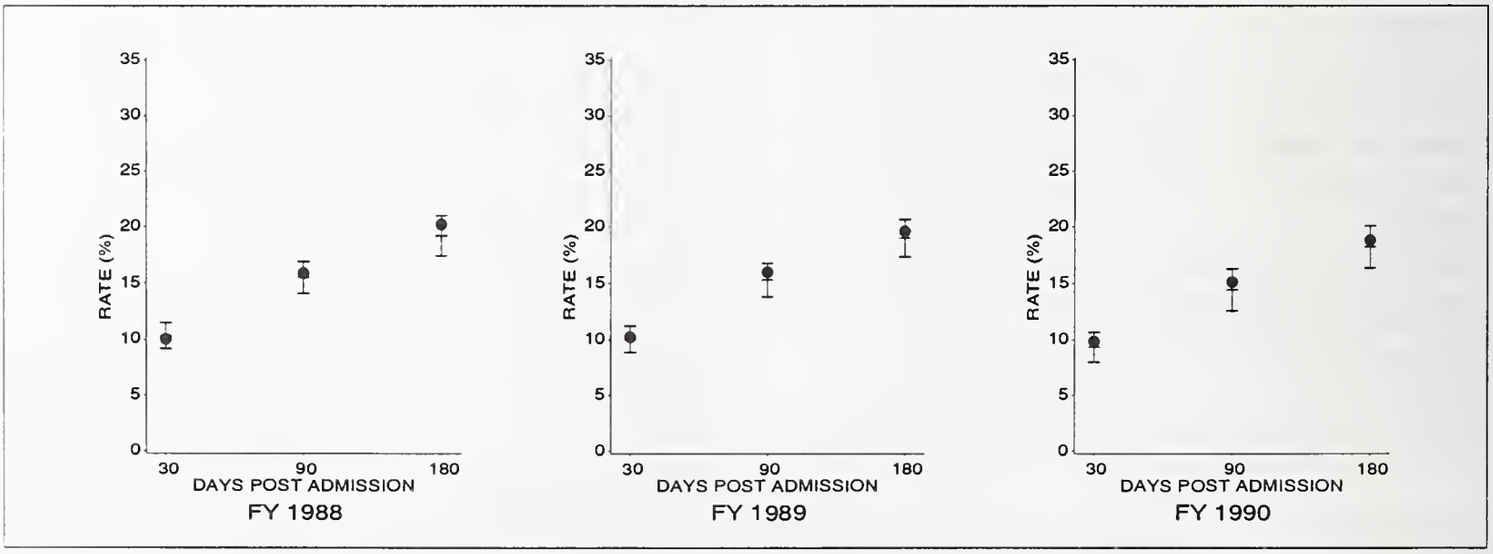
509 N BROAD ST
WOODBURY, NJ 08096
Medicare Provider Number: 310081

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	3236	9.8	9.3	0.7	15.1	14.4	0.9	18.8	18.2	0.9
CONDITIONS:										
Acute Myocardial Infarction	85	28.2	24.4	8.0	30.6	27.4	9.3	36.5	30.0	9.4
Congestive Heart Failure	221	17.6	14.6	3.3	27.6	23.3	5.1	33.5	29.5	5.1
Pneumonia/Influenza	118	25.4	18.4	5.7	34.7	25.0	5.0	39.8	29.4	5.4
Chronic Obstructive Pulmonary Disease	54	1.9	6.6	5.9	5.6	11.8	7.7	11.1	15.9	7.7
Transient Cerebral Ischemia	78	0.0	2.1	2.4	0.0	4.7	4.7	2.6	7.8	5.2
Stroke	118	13.6	18.9	5.7	21.2	25.8	5.1	23.7	29.5	5.4
Hip Fracture	72	1.4	5.4	4.5	11.1	10.0	5.8	13.9	13.5	4.2
Sepsis	29	41.4	32.6	-----	44.8	42.0	-----	44.8	47.2	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	20	0.0	4.4	-----	5.0	8.6	-----	5.0	12.1	-----
Carotid Endarterectomy	15	0.0	1.3	-----	0.0	2.3	-----	0.0	3.4	-----
Hip Replacement/Reconstruction	57	3.5	2.9	2.3	8.8	5.6	4.2	10.5	7.8	4.3
Open Reduction of Hip Fracture	35	0.0	5.0	-----	8.6	9.4	-----	11.4	12.7	-----
Prostatectomy	78	1.3	1.1	1.6	1.3	2.5	2.2	6.4	4.1	4.2
Cholecystectomy	72	0.0	2.7	2.8	2.8	4.9	4.2	2.8	6.3	4.4
Hysterectomy	21	0.0	0.8	-----	0.0	1.9	-----	0.0	3.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



UNDERWOOD MEMORIAL HOSPITAL

Medicare Provider Number: 310081

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.3 years
Proportion female	57.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	32.9 %
Transferred from skilled nursing facility	0.3 %
Admitted for elective procedure	11.8 %
Admitted for emergency	81.8 %

COMORBIDITIES:

Cancer	9.2 %
Chronic cardiovascular disease	31.8 %
Chronic liver disease	1.4 %
Chronic renal disease	2.1 %
Chronic pulmonary disease	15.3 %
Cerebrovascular degeneration	6.4 %
Diabetes mellitus	8.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	74.4%
State	23.1%
Outside State	2.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.7 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1989

PROFILE:

Total Beds	339
Occupancy Rate	74.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	37.4 %
Case Mix Index (CMI)	1.1412

STAFFING:

Total Number of Physicians	227
Percent of Physicians Board Certified Specialists	68.7 %
Medical Residents/Interns	6
Registered Nurses	299
Licensed Practical Nurses	92

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

UNION HOSPITAL

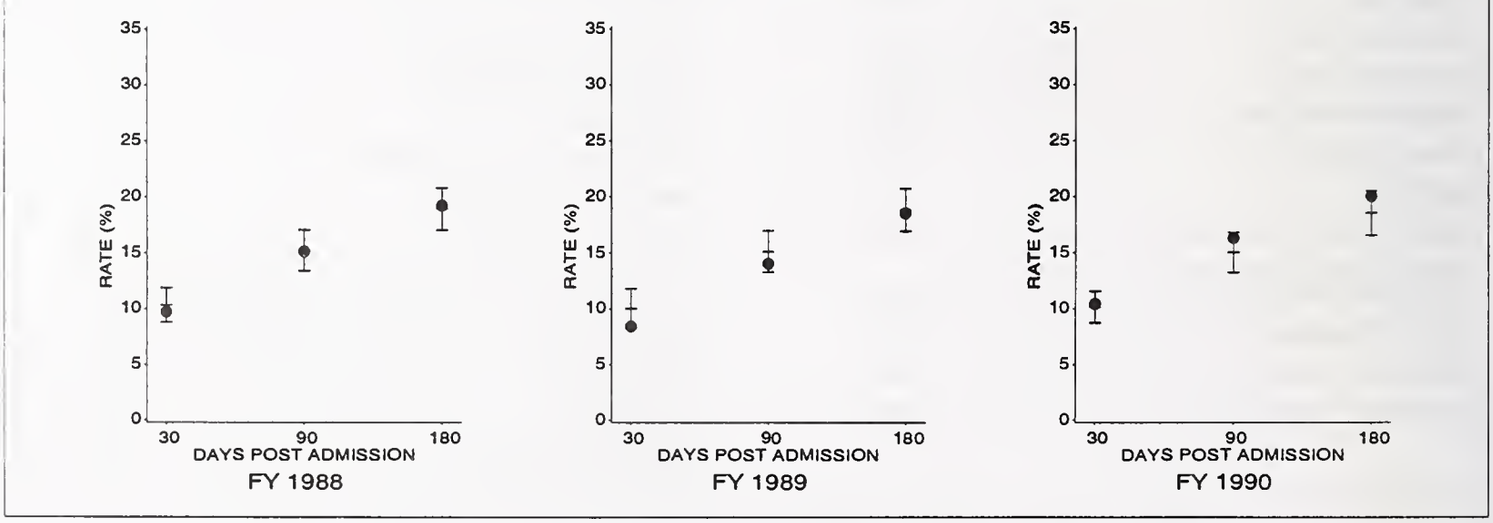
1000 GALLOPING HILL RD
UNION, NJ 07083
Medicare Provider Number: 310090

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1843	10.4	10.1	0.7	16.3	15.0	0.9	20.0	18.5	1.0
CONDITIONS:										
Acute Myocardial Infarction	44	20.5	27.5	-----	20.5	30.3	-----	25.0	33.3	-----
Congestive Heart Failure	125	13.6	15.0	3.3	26.4	23.5	4.0	34.4	29.7	5.0
Pneumonia/Influenza	89	22.5	17.4	5.3	31.5	23.9	6.7	32.6	28.4	5.7
Chronic Obstructive Pulmonary Disease	23	13.0	9.1	-----	13.0	14.6	-----	13.0	19.0	-----
Transient Cerebral Ischemia	44	4.5	1.7	-----	4.5	3.9	-----	4.5	6.3	-----
Stroke	76	17.1	23.0	7.1	27.6	30.8	6.0	32.9	35.0	6.4
Hip Fracture	53	5.7	7.4	4.2	15.1	13.1	5.8	17.0	16.8	9.4
Sepsis	19	15.8	26.9	-----	31.6	36.1	-----	36.8	40.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	25	0.0	4.6	-----	0.0	8.9	-----	16.0	12.8	-----
Carotid Endarterectomy	2	0.0	0.9	-----	0.0	1.8	-----	0.0	2.9	-----
Hip Replacement/Reconstruction	36	2.8	4.2	-----	11.1	7.9	-----	11.1	10.5	-----
Open Reduction of Hip Fracture	29	3.4	6.9	-----	10.3	12.6	-----	10.3	16.6	-----
Prostatectomy	79	3.8	1.3	2.4	6.3	3.1	3.3	6.3	5.0	3.3
Cholecystectomy	22	0.0	3.0	-----	4.5	5.6	-----	9.1	7.5	-----
Hysterectomy	4	0.0	1.3	-----	0.0	3.0	-----	0.0	5.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



UNION HOSPITAL
Medicare Provider Number: 310090

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.5 years
Proportion female	57.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	38.3 %
Transferred from skilled nursing facility	5.3 %
Admitted for elective procedure	17.8 %
Admitted for emergency	76.5 %

COMORBIDITIES:

Cancer	7.4 %
Chronic cardiovascular disease	38.1 %
Chronic liver disease	1.0 %
Chronic renal disease	1.3 %
Chronic pulmonary disease	11.8 %
Cerebrovascular degeneration	3.5 %
Diabetes mellitus	9.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	85.6%
State	12.4%
Outside State	2.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	12.1 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	201
Occupancy Rate	81.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	39.0 %
Case Mix Index (CMI)	1.1937

STAFFING:

Total Number of Physicians	187
Percent of Physicians Board Certified Specialists	77.0 %
Medical Residents/Interns	39
Registered Nurses	162
Licensed Practical Nurses	44

** Except for CMI

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

*** Not used in calculating mortality rates**

UNITED HOSPITALS OF NEWARK

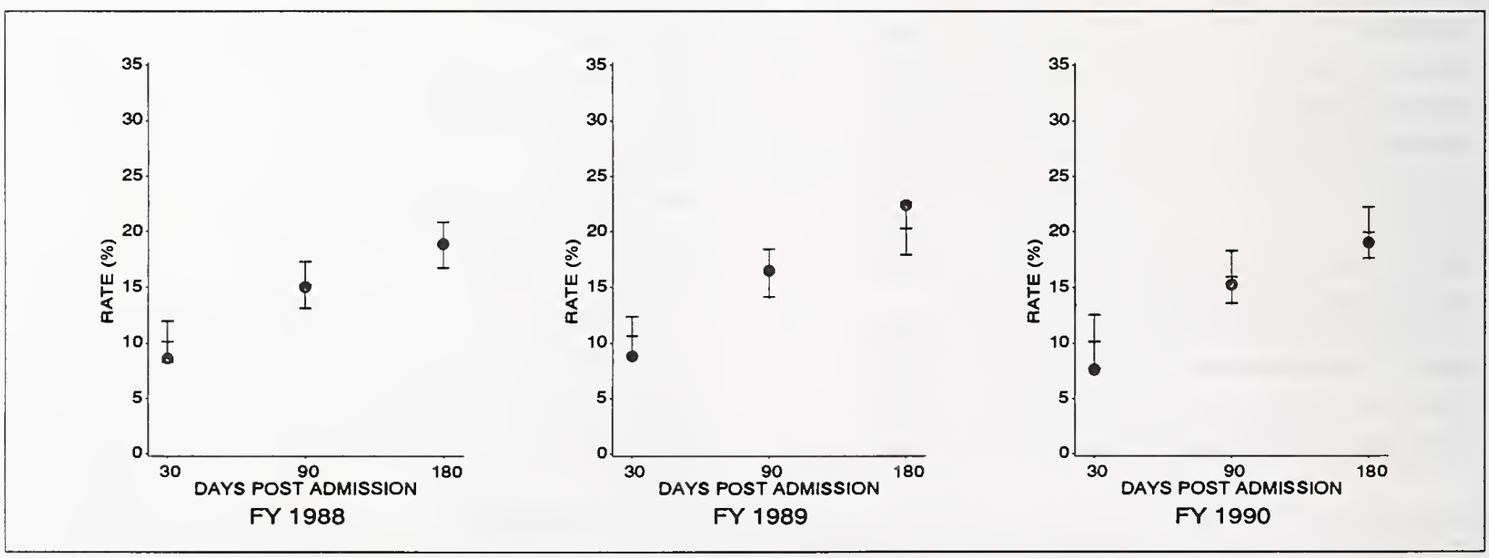
15 S 9TH ST
NEWARK, NJ 07107
Medicare Provider Number: 310062

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1251	7.6	10.1	1.2	15.2	15.9	1.2	19.0	19.9	1.2
CONDITIONS:										
Acute Myocardial Infarction	14	28.6	22.0	-----	28.6	25.6	-----	35.7	28.4	-----
Congestive Heart Failure	49	8.2	11.6	-----	12.2	19.3	-----	20.4	25.3	-----
Pneumonia/Influenza	58	10.3	13.9	5.3	19.0	19.5	5.3	20.7	23.4	5.8
Chronic Obstructive Pulmonary Disease	27	0.0	9.1	-----	7.4	15.7	-----	14.8	20.5	-----
Transient Cerebral Ischemia	51	3.9	1.8	2.6	3.9	3.9	2.9	3.9	6.2	4.1
Stroke	64	10.9	17.9	5.8	23.4	24.8	5.8	26.6	28.4	5.8
Hip Fracture	9	11.1	8.1	-----	44.4	13.8	-----	44.4	17.5	-----
Sepsis	42	23.8	29.4	-----	40.5	39.9	-----	42.9	44.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	4	0.0	5.0	-----	0.0	11.3	-----	0.0	16.9	-----
Carotid Endarterectomy	2	0.0	1.7	-----	0.0	3.5	-----	0.0	5.2	-----
Hip Replacement/Reconstruction	2	0.0	3.5	-----	0.0	5.7	-----	0.0	7.8	-----
Open Reduction of Hip Fracture	5	0.0	6.6	-----	40.0	11.5	-----	40.0	14.8	-----
Prostatectomy	24	4.2	2.1	-----	16.7	5.0	-----	16.7	8.1	-----
Cholecystectomy	2	0.0	0.7	-----	0.0	1.6	-----	0.0	2.7	-----
Hysterectomy	2	0.0	1.0	-----	0.0	2.5	-----	50.0	4.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



UNITED HOSPITALS OF NEWARK
Medicare Provider Number: 310062

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.6 years
Proportion female	62.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	34.5 %
Transferred from skilled nursing facility	4.1 %
Admitted for elective procedure	17.4 %
Admitted for emergency	39.0 %

COMORBIDITIES:

Cancer	9.1 %
Chronic cardiovascular disease	32.7 %
Chronic liver disease	1.6 %
Chronic renal disease	5.0 %
Chronic pulmonary disease	12.1 %
Cerebrovascular degeneration	2.2 %
Diabetes mellitus	15.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	92.2%
State	6.2%
Outside State	1.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	18.4 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	402
Occupancy Rate	75.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.1374

STAFFING:

Total Number of Physicians	(Not Available)
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	(Not Available)
Registered Nurses	(Not Available)
Licensed Practical Nurses	(Not Available)

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

UNIVERSITY HOSPITAL

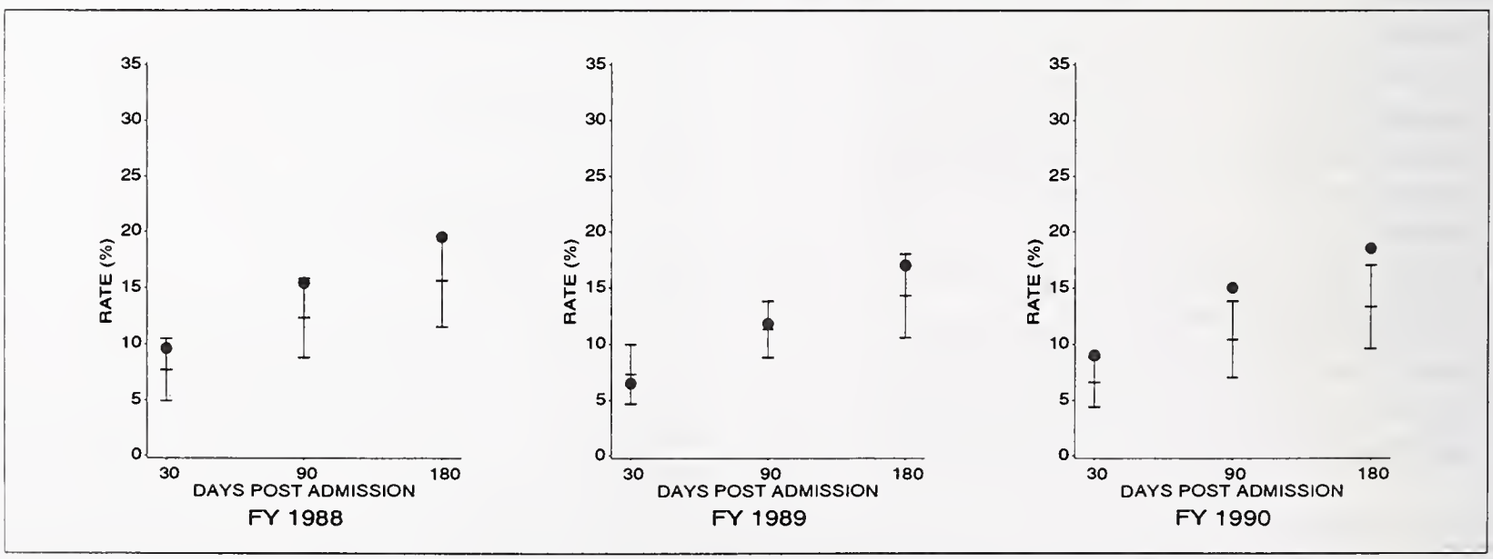
100 BERGEN ST
NEWARK, NJ 07107
Medicare Provider Number: 310119

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	868	9.0	6.6	1.1	15.0	10.4	1.7	18.5	13.3	1.9
CONDITIONS:										
Acute Myocardial Infarction	12	50.0	28.0	-----	50.0	30.5	-----	58.3	32.9	-----
Congestive Heart Failure	33	3.0	10.3	-----	9.1	16.5	-----	12.1	21.5	-----
Pneumonia/Influenza	20	15.0	9.3	-----	20.0	12.6	-----	20.0	14.8	-----
Chronic Obstructive Pulmonary Disease	6	16.7	8.9	-----	50.0	14.1	-----	50.0	18.1	-----
Transient Cerebral Ischemia	5	0.0	1.7	-----	0.0	3.7	-----	0.0	5.8	-----
Stroke	23	21.7	18.5	-----	43.5	23.1	-----	43.5	26.2	-----
Hip Fracture	5	20.0	7.3	-----	20.0	12.7	-----	20.0	15.7	-----
Sepsis	6	50.0	23.1	-----	66.7	29.0	-----	83.3	33.2	-----
PROCEDURES:										
Angioplasty	4	0.0	0.8	-----	0.0	1.4	-----	0.0	2.2	-----
Coronary Artery Bypass Graft	13	7.7	3.2	-----	7.7	4.9	-----	15.4	6.3	-----
Initial Pacemaker Insertion	1	0.0	0.4	-----	0.0	1.0	-----	0.0	1.7	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	2	0.0	9.5	-----	0.0	16.1	-----	0.0	19.4	-----
Open Reduction of Hip Fracture	1	100.0	7.7	-----	100.0	16.4	-----	100.0	22.5	-----
Prostatectomy	5	0.0	1.0	-----	20.0	2.6	-----	20.0	4.5	-----
Cholecystectomy	4	25.0	7.6	-----	25.0	16.5	-----	25.0	24.3	-----
Hysterectomy	7	0.0	0.2	-----	0.0	0.4	-----	0.0	0.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



UNIVERSITY HOSPITAL
Medicare Provider Number: 310119

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	63.0 years
Proportion female	43.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	20.5 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	45.0 %
Admitted for emergency	51.0 %

COMORBIDITIES:

Cancer	6.5 %
Chronic cardiovascular disease	21.1 %
Chronic liver disease	2.1 %
Chronic renal disease	5.3 %
Chronic pulmonary disease	7.0 %
Cerebrovascular degeneration	5.0 %
Diabetes mellitus	8.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	69.8%
State	26.5%
Outside State	3.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.9 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	489
Occupancy Rate	83.0 %
Ownership/Control	State Government
Medicare Discharges	9.5 %
Case Mix Index (CMI)	1.2890

STAFFING:

Total Number of Physicians	504
Percent of Physicians Board Certified Specialists	87.7 %
Medical Residents/Interns	0
Registered Nurses	610
Licensed Practical Nurses	82

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	Yes
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

VALLEY HOSPITAL

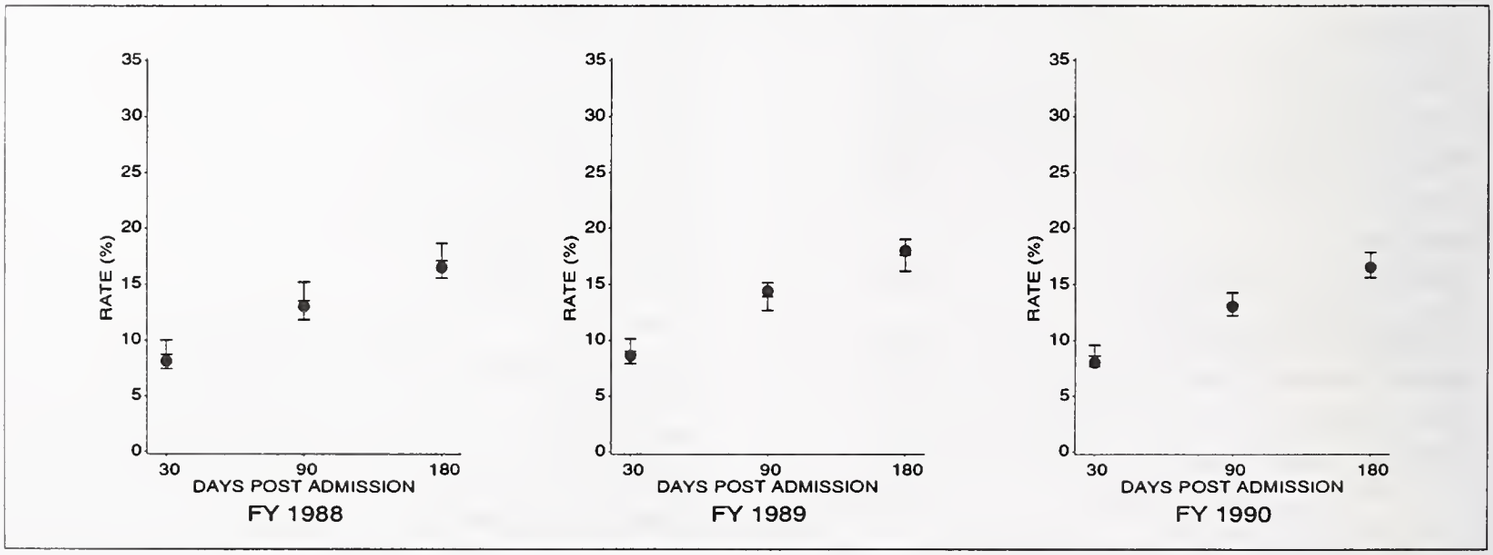
LINWOOD N VAN DIEN AVES
RIDGEWOOD, NJ 07450
Medicare Provider Number: 310012

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	4783	8.0	8.6	0.5	13.0	13.2	0.5	16.5	16.7	0.6
CONDITIONS:										
Acute Myocardial Infarction	146	20.5	25.0	5.8	21.9	28.2	6.2	26.0	30.9	6.8
Congestive Heart Failure	294	12.6	13.8	2.1	22.1	21.8	2.5	28.6	27.9	2.7
Pneumonia/Influenza	170	15.9	16.3	3.2	21.2	22.5	3.4	26.5	26.4	3.4
Chronic Obstructive Pulmonary Disease	51	3.9	7.7	5.2	11.8	13.2	6.6	15.7	17.6	6.0
Transient Cerebral Ischemia	57	1.8	1.9	2.4	3.5	4.3	3.3	5.3	6.8	3.8
Stroke	180	16.7	19.2	4.2	25.6	25.8	3.4	28.3	29.6	3.6
Hip Fracture	131	6.1	5.8	2.2	9.9	10.5	4.4	13.0	13.8	5.4
Sepsis	51	35.3	32.4	7.0	47.1	41.7	8.8	54.9	46.8	10.0
PROCEDURES:										
Angioplasty	61	0.0	2.7	3.6	1.6	3.9	3.8	3.3	5.0	4.2
Coronary Artery Bypass Graft	107	3.7	6.0	2.9	8.4	8.6	3.1	11.2	9.8	3.5
Initial Pacemaker Insertion	93	7.5	4.0	3.3	15.1	7.9	4.6	21.5	11.5	5.9
Carotid Endarterectomy	13	0.0	1.4	-----	0.0	2.5	-----	0.0	3.6	-----
Hip Replacement/Reconstruction	119	5.9	3.2	2.2	7.6	5.9	2.3	10.1	7.9	2.8
Open Reduction of Hip Fracture	43	0.0	5.7	-----	7.0	10.5	-----	9.3	13.9	-----
Prostatectomy	204	1.5	1.2	1.2	3.4	2.7	1.6	5.9	4.5	2.0
Cholecystectomy	89	1.1	2.8	2.2	4.5	5.3	2.5	6.7	7.0	2.7
Hysterectomy	43	0.0	0.4	-----	0.0	1.1	-----	2.3	1.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



VALLEY HOSPITAL
Medicare Provider Number: 310012

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.6 years
Proportion female	55.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	56.6 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	25.7 %
Admitted for emergency	69.5 %

COMORBIDITIES:

Cancer	9.9 %
Chronic cardiovascular disease	38.7 %
Chronic liver disease	0.7 %
Chronic renal disease	1.8 %
Chronic pulmonary disease	10.3 %
Cerebrovascular degeneration	2.4 %
Diabetes mellitus	6.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	68.1%
State	24.2%
Outside State	7.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.7 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	431
Occupancy Rate	91.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	31.5 %
Case Mix Index (CMI)	1.4340

STAFFING:

Total Number of Physicians	433
Percent of Physicians Board Certified Specialists	81.1 %
Medical Residents/Interns	0
Registered Nurses	515
Licensed Practical Nurses	38

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

WALLKILL VALLEY GENERAL HOSPITAL

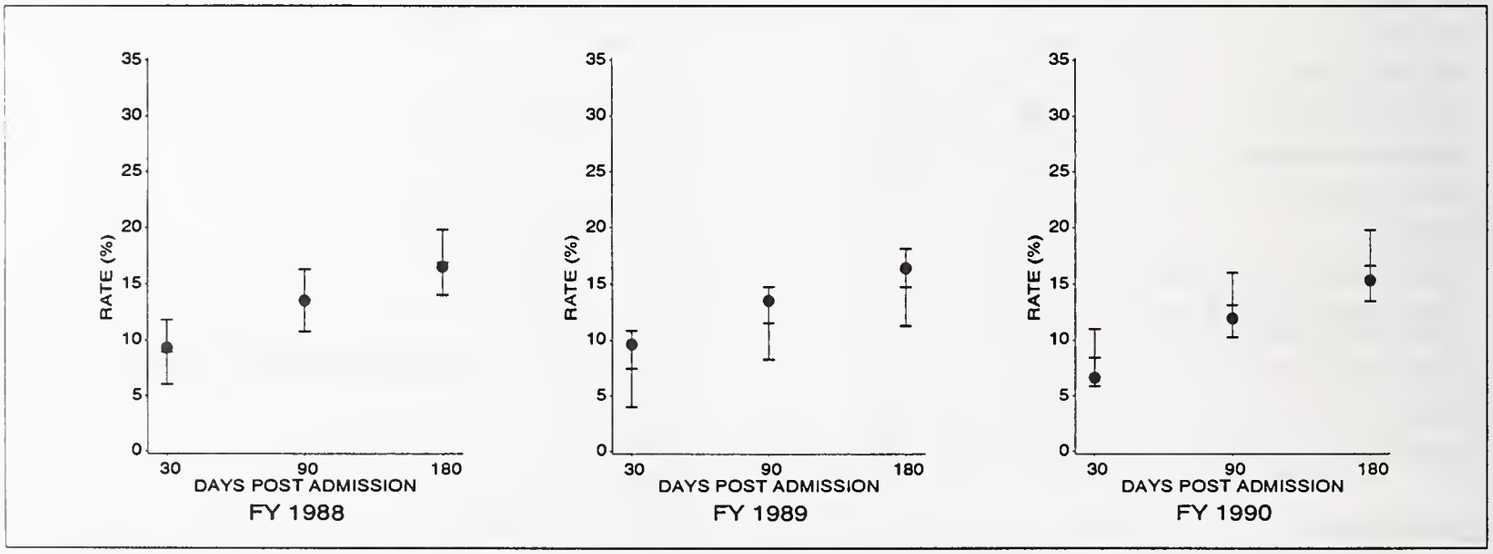
20 WALNUT ST
SUSSEX, NJ 07461
Medicare Provider Number: 310120

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	700	6.6	8.4	1.3	11.9	13.1	1.4	15.3	16.6	1.6
CONDITIONS:										
Acute Myocardial Infarction	13	15.4	21.9	-----	15.4	24.1	-----	15.4	26.5	-----
Congestive Heart Failure	43	14.0	13.0	-----	16.3	21.1	-----	30.2	27.2	-----
Pneumonia/Influenza	47	12.8	12.5	-----	21.3	16.9	-----	25.5	20.1	-----
Chronic Obstructive Pulmonary Disease	22	13.6	11.2	-----	27.3	18.8	-----	27.3	24.2	-----
Transient Cerebral Ischemia	27	0.0	1.8	-----	0.0	4.2	-----	0.0	7.0	-----
Stroke	29	17.2	21.7	-----	27.6	28.5	-----	41.4	32.1	-----
Hip Fracture	8	12.5	6.8	-----	12.5	12.5	-----	12.5	15.8	-----
Sepsis	7	42.9	22.9	-----	42.9	31.4	-----	57.1	36.5	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	4	0.0	3.1	-----	0.0	6.2	-----	0.0	9.2	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	7	14.3	4.3	-----	14.3	8.1	-----	14.3	10.5	-----
Open Reduction of Hip Fracture	1	0.0	3.2	-----	0.0	6.1	-----	0.0	7.9	-----
Prostatectomy	18	0.0	1.5	-----	5.6	3.9	-----	5.6	6.9	-----
Cholecystectomy	7	0.0	2.5	-----	0.0	4.0	-----	0.0	5.0	-----
Hysterectomy	5	0.0	2.4	-----	0.0	5.6	-----	0.0	8.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WALLKILL VALLEY GENERAL HOSPITAL

Medicare Provider Number: 310120

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	75.3 years
Proportion female	58.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	41.3 %
Transferred from skilled nursing facility	0.4 %
Admitted for elective procedure	10.1 %
Admitted for emergency	56.4 %

COMORBIDITIES:

Cancer	6.9 %
Chronic cardiovascular disease	35.1 %
Chronic liver disease	0.9 %
Chronic renal disease	1.1 %
Chronic pulmonary disease	14.0 %
Cerebrovascular degeneration	3.4 %
Diabetes mellitus	10.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	86.2%
State	7.2%
Outside State	6.6%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.9 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	106
Occupancy Rate	53.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.0565

STAFFING:

Total Number of Physicians	43
Percent of Physicians Board Certified Specialists	62.8 %
Medical Residents/Interns	0
Registered Nurses	51
Licensed Practical Nurses	23

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

WARREN HOSPITAL

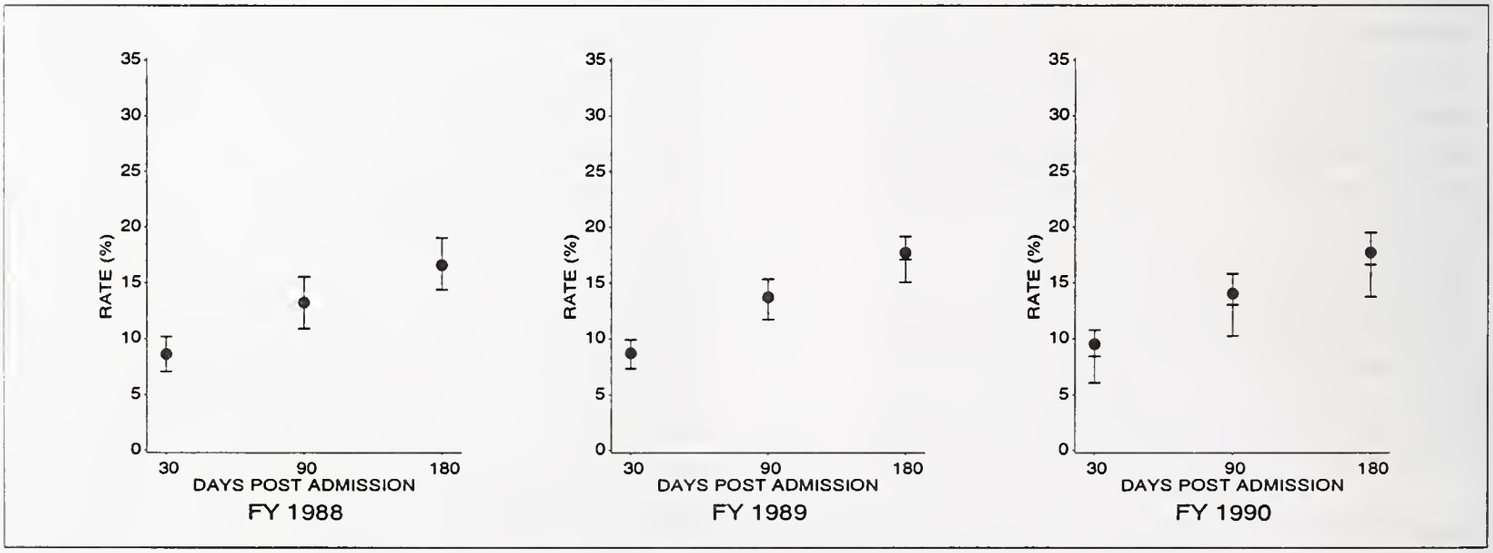
185 ROSEBERRY ST
PHILLIPSBURG, NJ 08865
Medicare Provider Number: 310060

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2065	9.5	8.4	1.2	14.0	13.0	1.4	17.7	16.6	1.4
CONDITIONS:										
Acute Myocardial Infarction	50	34.0	25.5	-----	38.0	28.4	-----	40.0	31.1	-----
Congestive Heart Failure	88	15.9	15.7	4.6	28.4	25.0	5.0	36.4	31.4	5.9
Pneumonia/Influenza	87	18.4	18.4	5.4	26.4	25.1	6.7	31.0	29.5	6.8
Chronic Obstructive Pulmonary Disease	75	10.7	9.3	3.5	16.0	16.3	4.3	22.7	21.4	5.3
Transient Cerebral Ischemia	67	1.5	1.7	2.5	3.0	3.8	4.7	6.0	6.4	5.3
Stroke	63	20.6	20.2	5.1	25.4	26.3	6.2	30.2	29.8	6.0
Hip Fracture	45	4.4	8.0	-----	13.3	14.2	-----	15.6	18.2	-----
Sepsis	20	25.0	23.3	-----	35.0	31.2	-----	40.0	35.8	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	22	9.1	2.7	-----	9.1	5.6	-----	13.6	8.3	-----
Carotid Endarterectomy	6	0.0	2.4	-----	0.0	4.4	-----	0.0	6.1	-----
Hip Replacement/Reconstruction	20	15.0	8.0	-----	15.0	15.0	-----	15.0	19.8	-----
Open Reduction of Hip Fracture	25	4.0	6.9	-----	12.0	12.3	-----	16.0	16.0	-----
Prostatectomy	34	0.0	0.9	-----	0.0	2.0	-----	0.0	3.4	-----
Cholecystectomy	46	6.5	3.8	-----	13.0	7.3	-----	17.4	9.6	-----
Hysterectomy	8	0.0	1.0	-----	0.0	2.1	-----	0.0	3.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WARREN HOSPITAL
Medicare Provider Number: 310060

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.8 years
Proportion female	57.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	41.8 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	14.2 %
Admitted for emergency	73.1 %

COMORBIDITIES:

Cancer	7.2 %
Chronic cardiovascular disease	34.0 %
Chronic liver disease	0.9 %
Chronic renal disease	3.2 %
Chronic pulmonary disease	14.7 %
Cerebrovascular degeneration	7.2 %
Diabetes mellitus	7.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	73.1%
State	14.1%
Outside State	12.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.5 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	214
Occupancy Rate	72.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	52.0 %
Case Mix Index (CMI)	1.1678

STAFFING:

Total Number of Physicians	116
Percent of Physicians Board Certified Specialists	53.4 %
Medical Residents/Interns	18
Registered Nurses	196
Licensed Practical Nurses	61

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

WAYNE GENERAL HOSPITAL

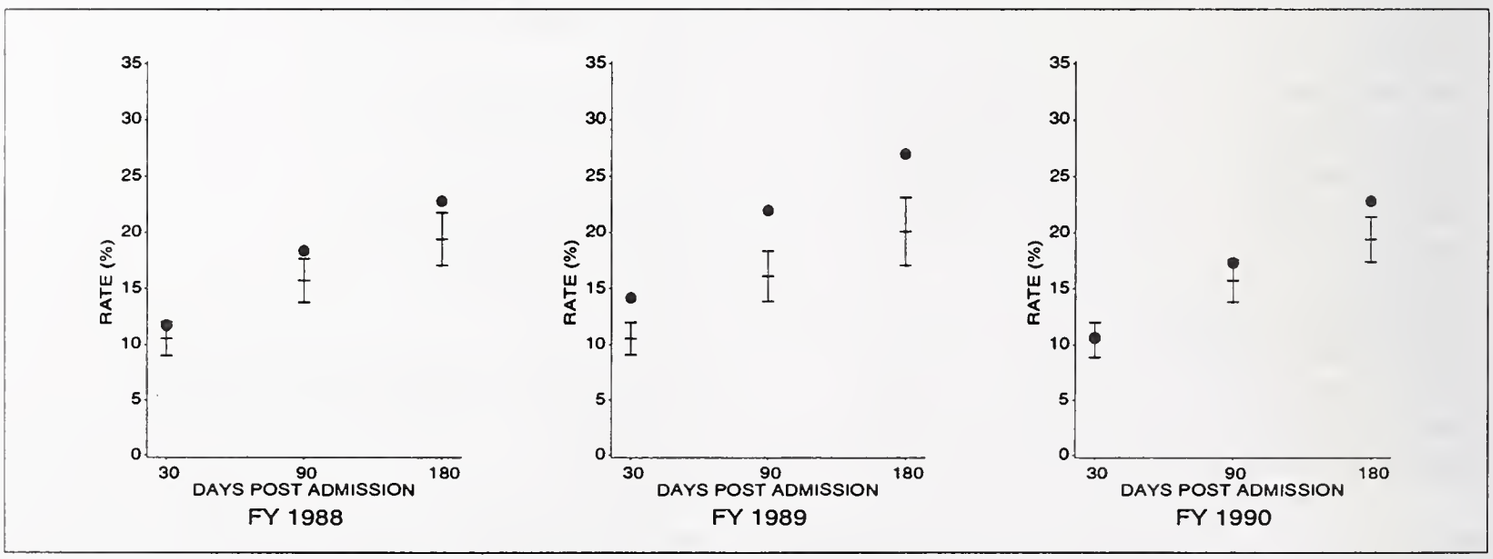
224 HAMBURG TNPKE
WAYNE, NJ 07470
Medicare Provider Number: 310116

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	2208	10.6	10.4	0.8	17.3	15.7	1.0	22.8	19.4	1.0
CONDITIONS:										
Acute Myocardial Infarction	36	36.1	31.5	-----	36.1	33.9	-----	38.9	36.7	-----
Congestive Heart Failure	113	15.9	14.3	3.5	28.3	22.3	5.7	32.7	28.5	5.7
Pneumonia/Influenza	171	24.0	17.5	3.8	33.9	23.9	4.2	43.9	28.2	5.2
Chronic Obstructive Pulmonary Disease	44	15.9	9.9	-----	22.7	16.6	-----	27.3	21.4	-----
Transient Cerebral Ischemia	62	1.6	2.0	2.0	4.8	4.4	2.8	8.1	7.1	3.4
Stroke	80	18.8	20.0	4.6	27.5	27.3	5.0	38.7	31.2	7.4
Hip Fracture	64	12.5	6.0	5.4	18.8	10.4	7.8	21.9	13.6	9.0
Sepsis	50	36.0	31.2	-----	46.0	38.7	-----	48.0	42.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	17	0.0	2.9	-----	11.8	6.2	-----	17.6	9.1	-----
Carotid Endarterectomy	2	0.0	1.0	-----	0.0	1.9	-----	0.0	2.7	-----
Hip Replacement/Reconstruction	38	0.0	4.0	-----	2.6	7.4	-----	5.3	10.2	-----
Open Reduction of Hip Fracture	32	18.8	5.8	-----	28.1	10.7	-----	34.4	14.1	-----
Prostatectomy	93	0.0	1.2	1.5	0.0	2.8	2.7	1.1	4.7	3.3
Cholecystectomy	55	1.8	2.1	4.1	9.1	3.8	4.9	9.1	5.2	5.1
Hysterectomy	4	0.0	0.7	-----	0.0	1.7	-----	0.0	2.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WAYNE GENERAL HOSPITAL
Medicare Provider Number: 310116

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	77.4 years
Proportion female	62.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	45.2 %
Transferred from skilled nursing facility	0.4 %
Admitted for elective procedure	14.9 %
Admitted for emergency	67.5 %

COMORBIDITIES:

Cancer	8.7 %
Chronic cardiovascular disease	38.0 %
Chronic liver disease	0.6 %
Chronic renal disease	1.2 %
Chronic pulmonary disease	13.1 %
Cerebrovascular degeneration	1.9 %
Diabetes mellitus	6.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	80.3%
State	16.9%
Outside State	2.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	12.5 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	212
Occupancy Rate	92.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	32.5 %
Case Mix Index (CMI)	1.2289

STAFFING:

Total Number of Physicians	184
Percent of Physicians Board Certified Specialists	70.7 %
Medical Residents/Interns	0
Registered Nurses	142
Licensed Practical Nurses	39

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

WEST HUDSON HOSPITAL

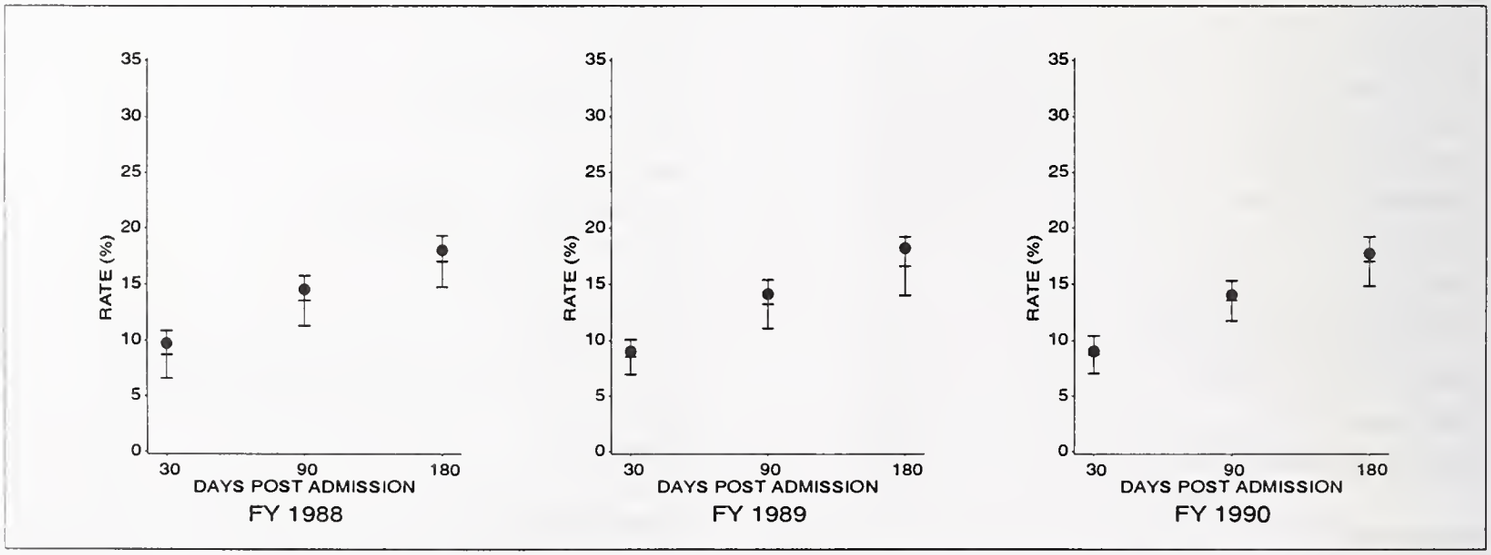
206 BERGEN AVE
KEARNY, NJ 07032
Medicare Provider Number: 310042

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%) 30 DAYS OBS	30 DAYS PRED	30 DAYS SD*	90 DAYS OBS	90 DAYS PRED	90 DAYS SD*	180 DAYS OBS	180 DAYS PRED	180 DAYS SD*
ALL CAUSES	1731	9.0	8.7	0.8	14.0	13.5	0.9	17.7	17.0	1.1
CONDITIONS:										
Acute Myocardial Infarction	39	23.1	23.7	-----	28.2	26.6	-----	30.8	29.2	-----
Congestive Heart Failure	127	14.2	14.0	3.5	23.6	21.9	4.7	33.9	27.6	6.0
Pneumonia/Influenza	67	6.0	13.6	6.3	10.4	18.5	6.7	13.4	21.7	6.7
Chronic Obstructive Pulmonary Disease	52	3.8	8.1	5.7	7.7	13.9	8.0	9.6	18.2	9.4
Transient Cerebral Ischemia	49	4.1	2.4	-----	6.1	5.4	-----	12.2	8.5	-----
Stroke	63	30.2	19.1	9.0	33.3	25.1	8.1	34.9	28.7	7.3
Hip Fracture	25	4.0	6.5	-----	8.0	11.3	-----	12.0	14.4	-----
Sepsis	8	25.0	20.4	-----	25.0	27.7	-----	25.0	31.7	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	18	0.0	3.2	-----	0.0	6.4	-----	5.6	9.3	-----
Carotid Endarterectomy	1	0.0	3.9	-----	0.0	6.3	-----	0.0	8.6	-----
Hip Replacement/Reconstruction	17	0.0	4.1	-----	0.0	7.6	-----	5.9	10.1	-----
Open Reduction of Hip Fracture	11	9.1	6.3	-----	18.2	11.2	-----	27.3	14.7	-----
Prostatectomy	75	0.0	1.5	2.0	0.0	3.3	3.8	4.0	5.3	2.8
Cholecystectomy	35	5.7	4.2	-----	11.4	7.9	-----	14.3	10.6	-----
Hysterectomy	3	0.0	2.0	-----	0.0	3.6	-----	0.0	5.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WEST HUDSON HOSPITAL
Medicare Provider Number: 310042

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.9 years
Proportion female	57.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	37.8 %
Transferred from skilled nursing facility	0.1 %
Admitted for elective procedure	0.2 %
Admitted for emergency	3.6 %

COMORBIDITIES:

Cancer	8.5 %
Chronic cardiovascular disease	44.0 %
Chronic liver disease	1.2 %
Chronic renal disease	0.9 %
Chronic pulmonary disease	12.2 %
Cerebrovascular degeneration	1.3 %
Diabetes mellitus	7.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	66.7%
State	32.1%
Outside State	1.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.6 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	213
Occupancy Rate	78.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	60.2 %
Case Mix Index (CMI)	1.1252

STAFFING:

Total Number of Physicians	92
Percent of Physicians Board Certified Specialists	79.3 %
Medical Residents/Interns	0
Registered Nurses	112
Licensed Practical Nurses	45

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

*** Not used in calculating mortality rates**

WEST JERSEY HEALTH SYSTEM

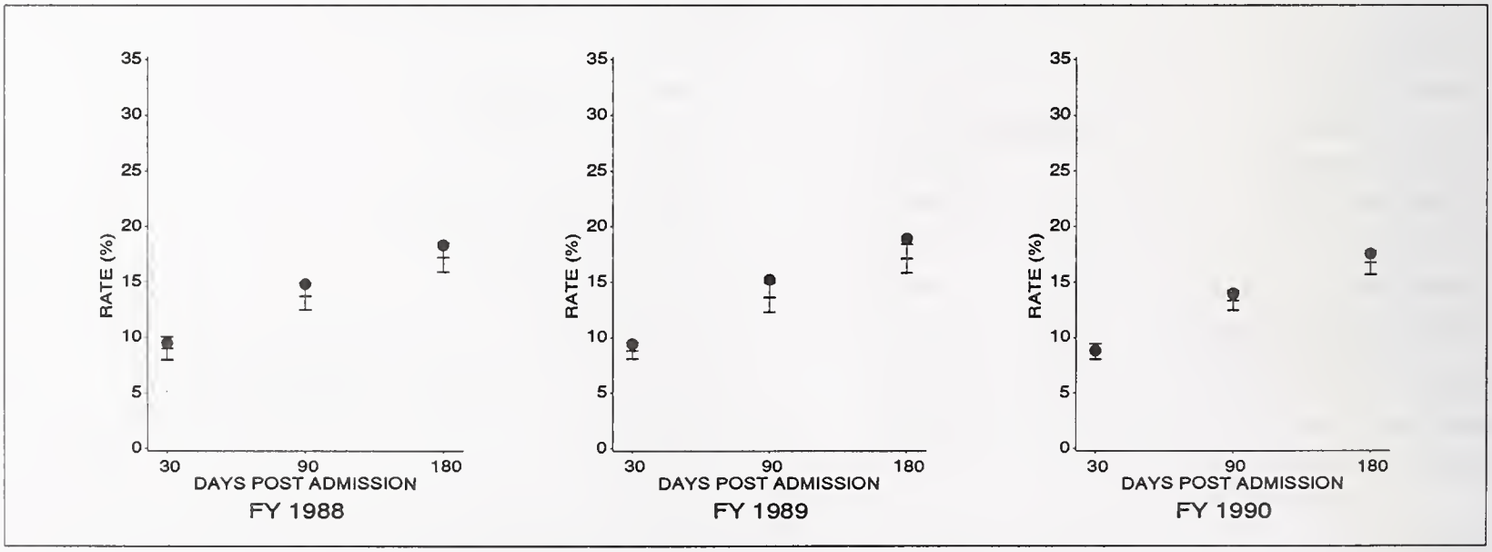
MT EPHRAIM & ATLANTIC AVES
CAMDEN, NJ 08104
Medicare Provider Number: 310022

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	7012	8.8	8.7	0.4	13.9	13.3	0.5	17.5	16.7	0.5
CONDITIONS:										
Acute Myocardial Infarction	193	22.8	26.0	3.4	28.0	28.8	3.3	31.6	31.5	3.5
Congestive Heart Failure	364	14.8	14.3	2.3	22.3	22.7	2.8	28.6	28.7	2.9
Pneumonia/Influenza	252	18.3	16.0	2.7	23.8	21.9	2.8	27.0	25.8	3.3
Chronic Obstructive Pulmonary Disease	109	11.9	10.9	3.9	17.4	17.8	3.7	25.7	22.6	4.8
Transient Cerebral Ischemia	190	2.1	1.8	1.5	6.3	4.0	1.9	6.8	6.4	1.9
Stroke	253	17.4	19.3	2.8	26.1	26.5	2.8	28.5	30.3	3.2
Hip Fracture	162	8.0	6.7	2.3	11.1	11.7	2.7	13.6	14.9	3.0
Sepsis	64	40.6	26.9	9.6	43.8	34.2	9.0	46.9	38.9	8.8
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	66	0.0	3.0	3.6	6.1	6.2	3.1	6.1	9.1	4.4
Carotid Endarterectomy	37	0.0	1.5	-----	2.7	2.9	-----	2.7	4.2	-----
Hip Replacement/Reconstruction	91	5.5	4.0	2.6	6.6	7.2	2.9	7.7	9.5	3.8
Open Reduction of Hip Fracture	87	8.0	5.7	4.0	12.6	10.4	4.0	14.9	13.5	4.5
Prostatectomy	183	1.1	1.0	0.8	3.3	2.2	1.3	4.4	3.8	1.7
Cholecystectomy	118	4.2	3.1	1.8	7.6	5.8	2.7	9.3	7.8	2.8
Hysterectomy	47	0.0	0.9	-----	2.1	2.0	-----	2.1	3.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WEST JERSEY HEALTH SYSTEM
Medicare Provider Number: 310022

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.7 years
Proportion female	56.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	36.2 %
Transferred from skilled nursing facility	0.0 %
Admitted for elective procedure	31.2 %
Admitted for emergency	64.1 %

COMORBIDITIES:

Cancer	7.5 %
Chronic cardiovascular disease	36.4 %
Chronic liver disease	1.5 %
Chronic renal disease	2.3 %
Chronic pulmonary disease	17.0 %
Cerebrovascular degeneration	3.8 %
Diabetes mellitus	7.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	69.0%
State	26.7%
Outside State	4.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.3 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1989

PROFILE:

Total Beds	579
Ownership.Control	Private, Non-Profit
Case Mix Index (CMI)	1.1715

STAFFING:

Medical Residents/Interns	9
Registered Nurses	822
Licensed Practical Nurses	174

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	Yes
Hospice Care	Yes
Intensive Care Unit	Yes
Organ Transplant	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

WILLIAM B KESSLER MEMORIAL HOSPITAL

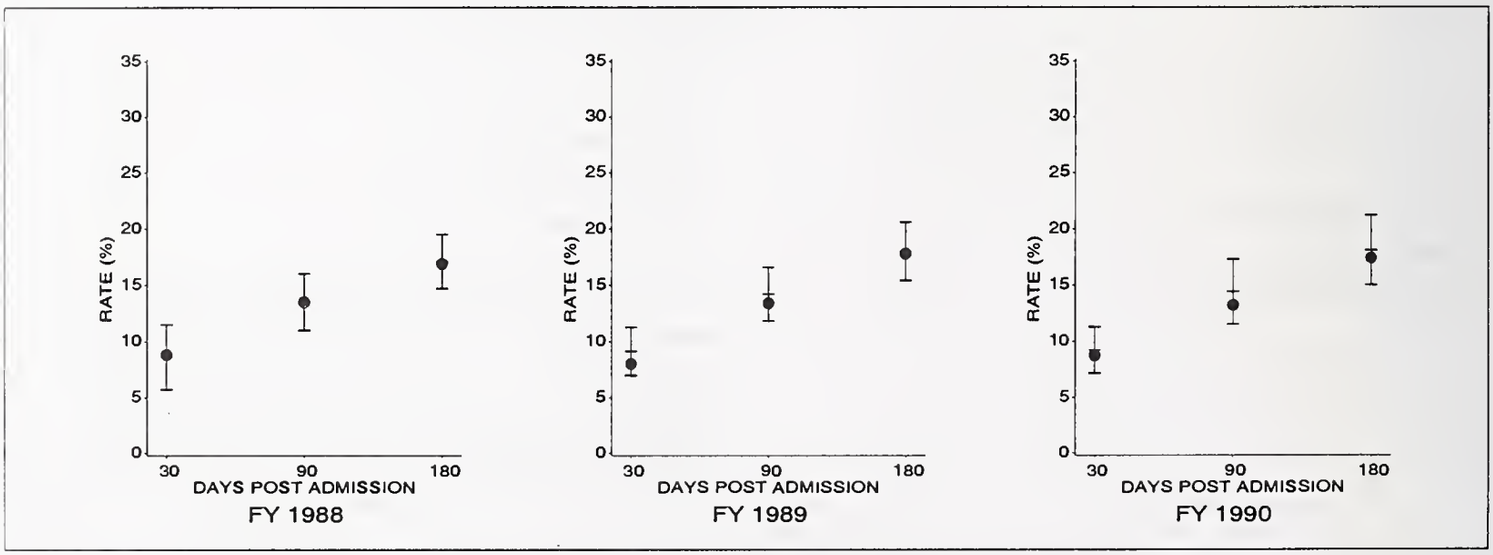
WHITE HORSE PIKE AT CENTRAL AVE
HAMMONTON, NJ 08037
Medicare Provider Number: 310088

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1037	8.7	9.2	1.0	13.2	14.4	1.5	17.4	18.1	1.6
CONDITIONS:										
Acute Myocardial Infarction	25	32.0	25.9	-----	36.0	29.1	-----	40.0	31.9	-----
Congestive Heart Failure	89	16.9	19.3	5.2	24.7	30.6	8.0	29.2	38.1	9.2
Pneumonia/Influenza	32	21.9	17.6	-----	25.0	24.8	-----	25.0	28.8	-----
Chronic Obstructive Pulmonary Disease	19	0.0	4.0	-----	10.5	7.7	-----	15.8	11.1	-----
Transient Cerebral Ischemia	24	0.0	1.8	-----	4.2	4.1	-----	8.3	6.7	-----
Stroke	26	30.8	21.3	-----	38.5	29.4	-----	53.8	33.5	-----
Hip Fracture	27	11.1	6.4	-----	11.1	11.3	-----	18.5	14.6	-----
Sepsis	12	16.7	25.9	-----	25.0	33.6	-----	41.7	39.4	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	10	0.0	4.3	-----	0.0	7.2	-----	20.0	9.6	-----
Carotid Endarterectomy	4	0.0	2.1	-----	0.0	3.9	-----	0.0	5.5	-----
Hip Replacement/Reconstruction	14	0.0	3.3	-----	0.0	6.3	-----	7.1	8.7	-----
Open Reduction of Hip Fracture	14	14.3	6.8	-----	14.3	12.3	-----	21.4	16.1	-----
Prostatectomy	30	3.3	1.6	-----	6.7	3.7	-----	13.3	6.1	-----
Cholecystectomy	23	0.0	1.5	-----	13.0	2.6	-----	13.0	3.3	-----
Hysterectomy	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WILLIAM B KESSLER MEMORIAL HOSPITAL

Medicare Provider Number: 310088

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.8 years
Proportion female	56.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	37.5 %
Transferred from skilled nursing facility	4.8 %
Admitted for elective procedure	8.2 %
Admitted for emergency	86.0 %

COMORBIDITIES:

Cancer	7.9 %
Chronic cardiovascular disease	43.4 %
Chronic liver disease	0.5 %
Chronic renal disease	1.9 %
Chronic pulmonary disease	18.7 %
Cerebrovascular degeneration	10.1 %
Diabetes mellitus	13.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	78.6%
State	18.2%
Outside State	3.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	11.9 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	130
Occupancy Rate	66.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.2074

STAFFING:

Total Number of Physicians	(Not Available)
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	(Not Available)
Registered Nurses	(Not Available)
Licensed Practical Nurses	(Not Available)

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

ZURBRUGG MEM HOSPITAL- RANCOCAS VALLEY

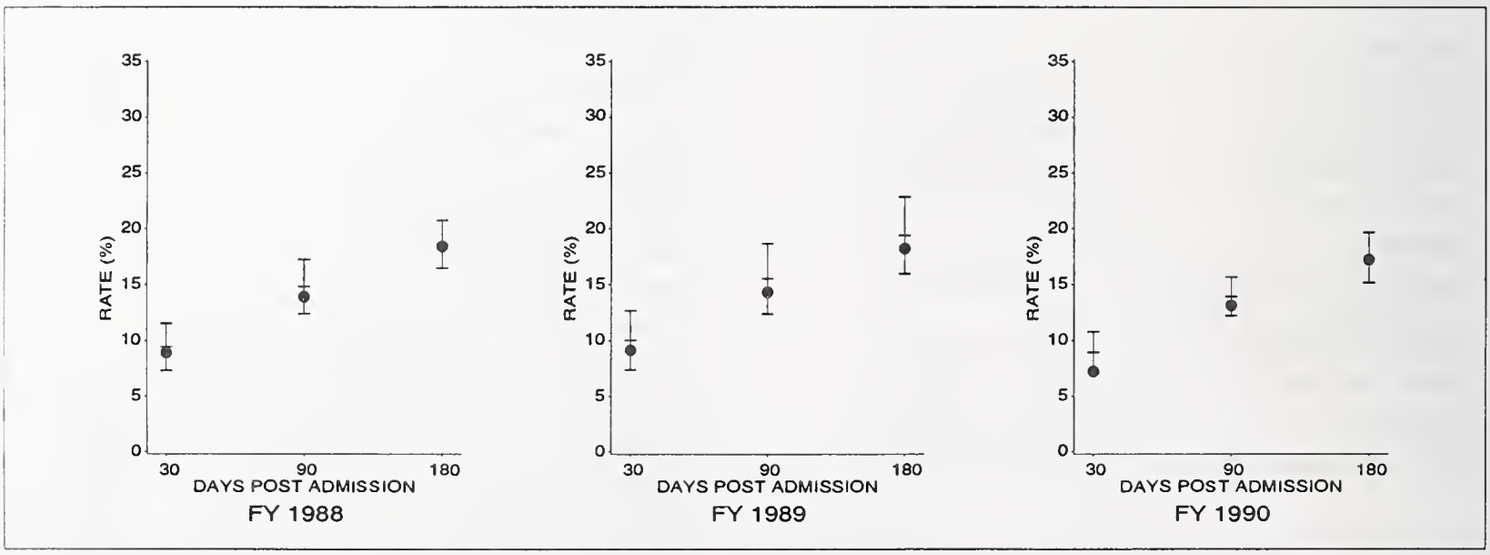
SUNSET RD
WILLINGBORO, NJ 08046
Medicare Provider Number: 310061

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1669	7.2	8.9	0.9	13.1	13.9	0.9	17.2	17.4	1.1
CONDITIONS:										
Acute Myocardial Infarction	39	23.1	26.6	-----	30.8	29.6	-----	30.8	32.4	-----
Congestive Heart Failure	110	11.8	14.7	4.5	21.8	24.1	5.7	30.9	30.5	6.2
Pneumonia/Influenza	70	15.7	18.2	5.8	22.9	25.1	6.2	25.7	29.1	7.4
Chronic Obstructive Pulmonary Disease	33	3.0	10.1	-----	6.1	18.6	-----	9.1	24.6	-----
Transient Cerebral Ischemia	42	2.4	1.7	-----	2.4	3.9	-----	7.1	6.4	-----
Stroke	63	7.9	19.4	8.5	14.3	25.2	10.5	19.0	28.8	10.0
Hip Fracture	35	8.6	7.0	-----	20.0	12.0	-----	28.6	15.4	-----
Sepsis	27	14.8	26.1	-----	25.9	33.9	-----	33.3	38.7	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	7	0.0	4.8	-----	0.0	8.3	-----	0.0	10.9	-----
Carotid Endarterectomy	3	0.0	0.6	-----	0.0	1.1	-----	0.0	1.7	-----
Hip Replacement/Reconstruction	18	11.1	5.0	-----	22.2	8.9	-----	27.8	11.8	-----
Open Reduction of Hip Fracture	16	0.0	5.4	-----	6.3	9.9	-----	18.8	13.1	-----
Prostatectomy	32	0.0	1.3	-----	0.0	3.2	-----	3.1	5.3	-----
Cholecystectomy	21	9.5	2.5	-----	9.5	5.3	-----	9.5	7.7	-----
Hysterectomy	12	0.0	0.5	-----	0.0	1.2	-----	0.0	2.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ZURBRUGG MEM HOSPITAL- RANCOCAS VALLEY

Medicare Provider Number: 310061

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	72.7 years
Proportion female	58.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	43.4 %
Transferred from skilled nursing facility	0.2 %
Admitted for elective procedure	13.9 %
Admitted for emergency	78.4 %

COMORBIDITIES:

Cancer	9.4 %
Chronic cardiovascular disease	36.3 %
Chronic liver disease	1.4 %
Chronic renal disease	2.2 %
Chronic pulmonary disease	20.9 %
Cerebrovascular degeneration	3.9 %
Diabetes mellitus	11.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	87.7%
State	7.4%
Outside State	4.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.7 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	258
Occupancy Rate	73.0 %
Ownership.Control	Private, Non-Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.1505

STAFFING:

Total Number of Physicians	278
Percent of Physicians Board Certified Specialists	86.7 %
Medical Residents/Interns	0
Registered Nurses	198
Licensed Practical Nurses	43

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation	No
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

*** Not used in calculating mortality rates**

ZURBRUGG MEMORIAL HOSPITAL

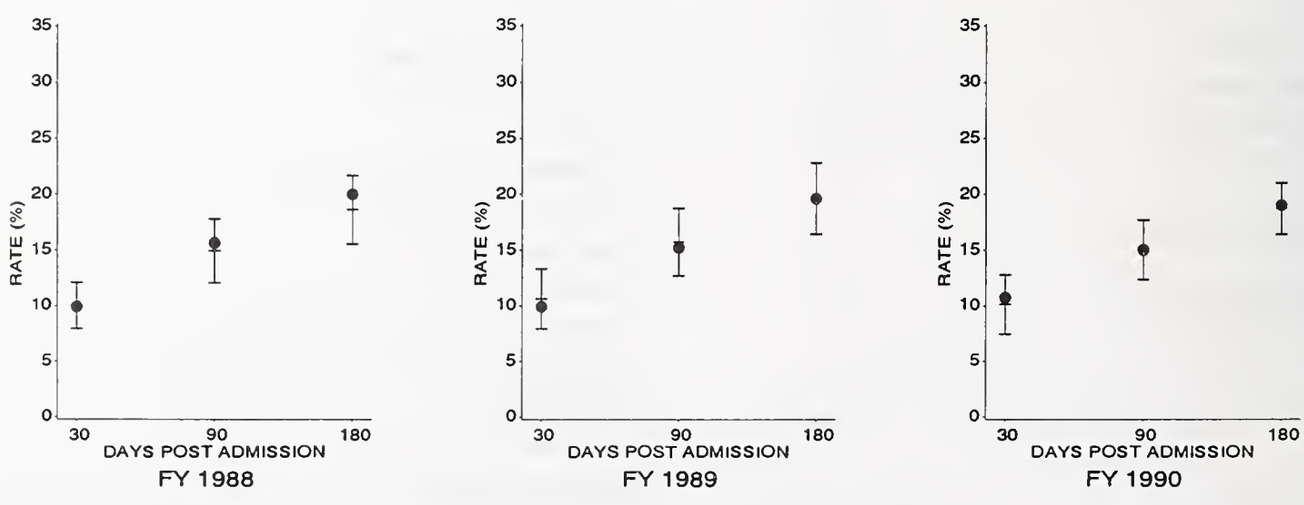
TAYLOR ST
RIVERSIDE, NJ 08075
Medicare Provider Number: 310056

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	1136	10.7	10.1	1.3	15.0	15.0	1.3	19.0	18.7	1.2
CONDITIONS:										
Acute Myocardial Infarction	40	42.5	27.8	-----	42.5	30.3	-----	42.5	32.7	-----
Congestive Heart Failure	82	4.9	13.8	5.7	9.8	22.0	7.1	15.9	28.0	7.3
Pneumonia/Influenza	66	21.2	16.7	6.5	25.8	22.9	6.3	30.3	26.7	6.6
Chronic Obstructive Pulmonary Disease	11	27.3	8.6	-----	27.3	14.4	-----	36.4	18.7	-----
Transient Cerebral Ischemia	23	0.0	2.4	-----	0.0	5.4	-----	4.3	8.8	-----
Stroke	49	26.5	21.9	-----	34.7	28.7	-----	38.8	32.4	-----
Hip Fracture	32	0.0	7.6	-----	3.1	13.5	-----	6.3	17.3	-----
Sepsis	31	25.8	35.7	-----	32.3	43.0	-----	38.7	47.9	-----
PROCEDURES:										
Angioplasty	0									
Coronary Artery Bypass Graft	0									
Initial Pacemaker Insertion	15	0.0	2.8	-----	6.7	5.1	-----	6.7	6.9	-----
Carotid Endarterectomy	0									
Hip Replacement/Reconstruction	9	0.0	2.7	-----	0.0	4.7	-----	0.0	6.3	-----
Open Reduction of Hip Fracture	24	0.0	7.6	-----	4.2	13.8	-----	8.3	17.9	-----
Prostatectomy	25	0.0	1.1	-----	0.0	2.5	-----	4.0	4.1	-----
Cholecystectomy	21	0.0	2.1	-----	0.0	3.6	-----	0.0	4.6	-----
Hysterectomy	8	0.0	0.4	-----	0.0	0.9	-----	0.0	1.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ZURBRUGG MEMORIAL HOSPITAL

Medicare Provider Number: 310056

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	76.3 years
Proportion female	57.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	24.9 %
Transferred from skilled nursing facility	1.0 %
Admitted for elective procedure	13.4 %
Admitted for emergency	82.2 %

COMORBIDITIES:

Cancer	7.1 %
Chronic cardiovascular disease	41.1 %
Chronic liver disease	0.6 %
Chronic renal disease	2.3 %
Chronic pulmonary disease	12.9 %
Cerebrovascular degeneration	5.8 %
Diabetes mellitus	8.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	86.2%
State	9.3%
Outside State	4.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.2 Days
State	11.7 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1990

PROFILE:

Total Beds	158
Ownership.Control	Private, Non-Profit
Case Mix Index (CMI)	1.2009

STAFFING:

Medical Residents/Interns	0
Registered Nurses	59
Licensed Practical Nurses	240

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	Yes
Hospice Care	Yes
Intensive Care Unit	Yes
Organ Transplant	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

NEW JERSEY

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	211,846	9.2	9.4	0.1	14.8	14.4	0.2	18.6	18.0	0.2
CONDITIONS:										
Acute Myocardial Infarction	6,400	27.5	27.2	0.6	31.8	30.3	0.7	34.7	33.0	0.9
Congestive Heart Failure	12,389	13.9	14.9	0.3	23.2	23.6	0.4	30.0	29.8	0.5
Pneumonia/Influenza	8,272	18.3	17.8	0.5	25.8	24.2	0.7	29.9	28.3	0.8
Chronic Obstructive Pulmonary Disease	3,210	9.1	9.5	0.6	16.4	16.1	0.7	21.4	20.9	0.9
Transient Cerebral Ischemia	4,498	1.6	2.0	0.4	4.3	4.3	0.3	7.0	6.9	0.4
Stroke	7,975	19.8	20.7	0.6	28.5	27.5	0.5	32.8	31.3	0.5
Hip Fracture	4,899	6.1	6.8	0.5	11.6	12.0	0.7	15.2	15.6	0.6
Sepsis	2,487	30.7	29.5	1.1	41.3	38.1	1.3	46.7	43.1	1.5
PROCEDURES:										
Angioplasty	1,036	2.3	2.6	0.7	3.3	3.6	0.6	4.0	4.5	0.7
Coronary Artery Bypass Graft	1,715	7.5	6.0	1.1	10.6	8.8	1.0	12.5	10.1	1.3
Initial Pacemaker Insertion	1,998	3.5	3.5	0.4	7.2	6.7	0.7	11.1	9.6	1.3
Carotid Endarterectomy	700	1.7	1.6	0.5	4.1	3.0	0.9	6.4	4.4	1.4
Hip Replacement/Reconstruction	3,018	3.5	3.8	0.5	6.8	7.1	0.9	9.0	9.5	1.0
Open Reduction of Hip Fracture	2,562	5.6	6.3	0.7	11.1	11.5	0.7	14.9	15.1	0.7
Prostatectomy	6,913	0.9	1.1	0.3	2.7	2.6	0.2	4.6	4.4	0.3
Cholecystectomy	3,341	2.6	2.9	0.5	5.3	5.3	0.8	6.9	7.0	0.7
Hysterectomy	1,458	0.4	0.8	0.2	1.6	1.8	0.8	3.2	2.8	1.7

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.5 years
Proportion female	56.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	35.2 %
Transferred from skilled nursing facility	3.2 %
Admitted for elective procedure	22.2 %
Admitted for emergency	55.8 %

COMORBIDITIES:

Cancer	8.5 %
Chronic cardiovascular disease	39.4 %
Chronic liver disease	1.1 %
Chronic renal disease	3.4 %
Chronic pulmonary disease	13.0 %
Cerebrovascular degeneration	3.7 %
Diabetes mellitus	8.3 %

ALL STATES

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES	6,542,299	9.0	9.0	-----	13.9	13.7	-----	17.3	17.1	-----
CONDITIONS:										
Acute Myocardial Infarction	204,673	25.3	25.6	-----	29.5	28.7	-----	32.1	31.4	-----
Congestive Heart Failure	335,426	14.3	14.4	-----	22.9	22.8	-----	29.2	29.0	-----
Pneumonia/Influenza	313,303	15.3	15.5	-----	21.5	21.3	-----	25.5	25.1	-----
Chronic Obstructive Pulmonary Disease	107,387	8.0	8.0	-----	14.1	14.0	-----	18.7	18.5	-----
Transient Cerebral Ischemia	96,866	1.8	1.8	-----	4.0	4.0	-----	6.4	6.5	-----
Stroke	241,803	19.7	19.8	-----	26.5	26.3	-----	30.4	30.0	-----
Hip Fracture	163,386	6.7	6.5	-----	11.7	11.5	-----	15.1	15.0	-----
Sepsis	80,999	25.6	25.7	-----	34.6	33.8	-----	39.8	38.6	-----
PROCEDURES:										
Angioplasty	58,026	3.0	3.0	-----	4.0	4.0	-----	5.0	4.9	-----
Coronary Artery Bypass Graft	80,798	6.0	5.7	-----	8.3	8.1	-----	9.5	9.2	-----
Initial Pacemaker Insertion	49,642	3.2	3.3	-----	6.5	6.3	-----	9.1	9.1	-----
Carotid Endarterectomy	29,990	1.6	1.5	-----	2.8	2.8	-----	4.0	4.1	-----
Hip Replacement/Reconstruction	122,156	3.4	3.2	-----	6.2	5.9	-----	8.1	8.0	-----
Open Reduction of Hip Fracture	80,075	6.1	6.0	-----	11.2	11.0	-----	14.5	14.5	-----
Prostatectomy	211,087	0.9	1.0	-----	2.2	2.3	-----	3.7	3.8	-----
Cholecystectomy	124,259	2.9	2.7	-----	5.0	4.9	-----	6.5	6.5	-----
Hysterectomy	53,905	0.7	0.7	-----	1.4	1.5	-----	2.2	2.4	-----

* The Standard Deviation (SD) is not calculated.

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission	74.1 years
Proportion female	55.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician	46.1 %
Transferred from skilled nursing facility	1.1 %
Admitted for elective procedure	22.0 %
Admitted for emergency	46.5 %

COMORBIDITIES:

Cancer	7.6 %
Chronic cardiovascular disease	36.6 %
Chronic liver disease	1.0 %
Chronic renal disease	3.4 %
Chronic pulmonary disease	15.0 %
Cerebrovascular degeneration	3.9 %
Diabetes mellitus	8.0 %

Hospital Comments

West Main Street
Freehold, NJ 07728
Tel (201) 431-2000

CentraState
Medical Center

March 20, 1992

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Rooms 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187
ATTN: Robert Moore

RE: Medicare Provider #310111

Dear Ms. Wilensky:

Thank you for the opportunity to respond to HCFA's current release of data on hospital mortality rates.

We would like to note that our actual mortality rate for "all cases" was well below the predicted.

We will limit our comments to mortality within 30 days, since extended periods bring into effect so many factors outside the hospital that no realistic conclusions can be drawn.

The statement made by HCFA that "the number of cases or deaths in (some) categories is too small to permit satisfactory estimation of the standard deviation" is key. We would like to further emphasize this, noting that in such categories, one mortality one way or the other would completely and dramatically change the conclusion -- therefore these categories should be ignored.

Again, thank you for the opportunity to present this response.

Yours truly,

Robert Zupa
Acting President & Chief
Executive Officer

Chilton Memorial Hospital
Pompton Plains · NJ · 07444
201/831-5000

VHA
Member of Voluntary Hospitals of America, Inc.

Medicare Provider # 310017

March 16, 1992

Gail R. Wilensky, Ph.D., Administration
Health Care Financing Authority
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

Attention: Robert Moore

Gentlemen:

I would like to take this opportunity to respond to the forthcoming release of the HCFA Medicare Hospital Mortality Information as it relates to our hospital.

As in previous years, we have taken the Medicare Mortality report very seriously. Based on this data, we have completed a review of the FY1990 and have concluded that there are no areas where the "observed mortality rate exceeds the predicted mortality rate to an extent that is meaningful or significant" indicating again that there are no identified problems.

We pride ourselves on our internal Quality Assurance program which monitors the quality of care provided by the Medical-Dental Staff. Since the program is ongoing, patterns and trends are looked for as well as opportunities to improve the care provided.

This quality assurance program which was recognized as a superior model during our latest JCAHO/DOH inspections utilizes many different indicators in its analyses of care rendered. Mortalities is just one such example of an indication utilized in our review. However, in our monitoring, we go beyond simply utilizing a statistical analysis, which by itself is far from being an adequate

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Greenwich Mills Company

Robert L. Simpson, Ph.D.
William Paterson College

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Touche Ross & Co.

Medicare Provide #310017

measure of quality of care. As a part of our analyses of mortality cases, our physicians comprehensively review the total care rendered to these patients. This review takes into consideration all factors involving the patients' care including the expected outcome of the hospitalization, i.e., we are geographically located such that we are prime receiving hospital for nursing home patients, many such patients are admitted with both personal and family requests that no excessive medical and technical interventions be used to prolong life beyond its natural limits. Although our overall medicare mortality rate falls within HCFA's predicted range, our review of all mortalities continues.

As in the past, we will continue to strive to provide our patients, regardless of their ability to pay, or their age, with Quality Healthcare. We view our hospital as the premier community hospital and expect those who are affiliated to maintain our high quality standards of care.

Sincerely,

James J. Doyle, Jr.
President and Chief Executive Officer

JJD/lf

COMMUNITY
MEDICAL CENTER
OCEAN COUNTY'S REGIONAL REFERRAL CENTER

310041

March 19, 1992

Gail R. Wilensky, PhD, Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187
ATTN: Robert Moore

Dear Mr. Moore:

Community Medical Center appreciates the opportunity to comment on the Health Care Financing Administration data provided in the hospital's Medicare Information Report.

The hospital plans to use the data as part of our comprehensive ongoing program to identify, investigate, and resolve quality problems. The data is useful primarily to indicate whether further study is warranted. Only peer review can determine whether care was appropriate and of high quality.

We would encourage that with the release of data, the public should be made aware that even statistically significant variations between observed and expected rates show only whether a hospital is different from others, not why it is different. Other factors, such as a lack of adequate post hospital care may account for the variations, particularly for deaths occurring after the patient was discharged.

A large percent of our Medicare patients can be categorized as "older geriatric", i.e., 75 years and older, most of whom have multiple medical problems. Additionally, many hospitalizations are for the care of the dying, not curative care, and for these, mortality is a poor measure of outcome.

99 HIGHWAY 37 WEST
TOMS RIVER, NEW JERSEY 08755-6423
(908) 240-8000

VHA

It is also true that the data does not fully address severity of illness. To assess mortality data appropriately, and the associated quality of care rendered, consideration must be given to the level of risk and status of the patient at admission. Many of our patients are admitted from nursing homes in advanced stages of cancer and other life-threatening diseases, and are therefore at higher risk.

In conclusion, we would like to thank HCFA for the opportunity to present this response. Community Medical Center has maintained a tradition of excellence and is committed to continue to maintain the strictest standards to insure that the tradition continues.

Sincerely,

R Ynaya MD

R. Ynaya, MD
Vice President for
Medical Affairs

RY/ehm

ELIZABETH GENERAL
EGMC
MEDICAL CENTER

Mailing Address:
925 East Jersey Street
Elizabeth, New Jersey 07201
(908) 289-8600

March 19, 1992

Gail R. Wilensky, Ph.D., Administrtor
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187
Attn: Robert Moore

RE: Medicare Provider #310027 and #310033

Dear Dr. Wilensky:

This letter conveys the comments of Elizabeth General Medical Center to the Health Care Financing Administration regarding the release of Medicare mortality data.

Since receiving the data on March 2, 1992, it has been reviewed by a number of key Medical Center staff. It should be noted that data was received for both Elizabeth General Medical Center - West (Medicare Provider #310027) and Elizabeth General Medical Center - East (formerly Alexian Brothers Hospital, Medicare Provider #310033). Elizabeth General Medical Center acquired the assets of Alexian Brothers Hospital effective February 1, 1990. Medicare hospital mortality data related to Elizabeth General Medical Center - East, between the period October 1, 1989 and January 31, 1990, is in fact, data related to the former Alexian Brother Hospital. Elizabeth General Medical Center does not accept responsibility for the data which reflects this period of time.

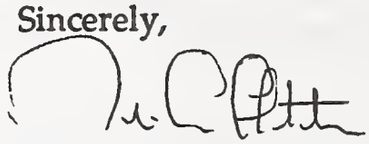
Elizabeth General Medical Center has a strong and effective quality assurance program involving administration, medical, nursing, and support staff. Program participants undertake a constant and in-depth review of appropriate aspects of patient care including a review of mortality data. In addition, Elizabeth General consistently meets the vigorous quality standards set forth by the Joint Commission on Accreditation of Healthcare Organizations.

As a result of its extensive experience in quality assurance, the Medical Center's staff recognizes that mortality information by itself is not an accurate measurement of the quality of patient care. We do not recommend the use of mortality information alone to make judgments about the quality of care in an individual hospital or to make comparisons among hospitals. Mortality data may be significantly influenced by the population served, for example, age and socio/economic background are two factors which historically impact upon the incidence of mortality.

Elizabeth General Medical Center is currently a 552 bed, private, non-profit, voluntary medical center. Our location and range of services reflect a strong commitment to a high risk population. Elizabeth General's percentage of Medicare admissions (24%) is significant when one considers that maternity, pediatric and children's psychiatric admissions are included in our overall number of total admissions. Services provided by the medical center include a 20 bed intensive /coronary care unit, a 34 bed oncology unit, a renal dialysis program with 160 registered patients who require admissions regularly and a 60 bed voluntary/involuntary psychiatric unit. Meeting the health care needs of the area's indigent population is a longstanding tradition of the Medical Center, which provided approximately 25% of its total 1991 inpatient activity to the sick poor. The greater Elizabeth community serves as a hub for transportation and industry and, as such, has come to rely heavily upon Elizabeth General for emergency services. In 1991, the Medical Center had more than 53,000 emergency visits. In addition, more than 80% of all medicare patients were admitted through our emergency department.

Thank you for the opportunity to present this response.

Sincerely,



David A. Fletcher
President

/ds

HOLY NAME HOSPITAL
718 Teaneck Road
Teaneck, N.J. 07666
(201) 833-3000

Medicare Provider #310008

March 19, 1992

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12 Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

Dear Dr. Wilensky:

Holy Name Hospital has received and reviewed the 1990 mortality data forwarded to us by your agency. Our Administration, Board of Trustees and Medical Staff have had a longstanding commitment to provide high quality care to all of our patients. therefore, we welcome the increasing interest on the part of the H.C.F.A. and other groups in the quality of healthcare.

Holy Name Hospital's longstanding commitment to the delivery of quality care is evidenced by the continued growth of our internal Quality Assurance/Improvement program. Mortality rates are only one of the many indicators of quality care which we continually measure and review.

As with all U.S. hospitals, your agency is only one of many which continually reviews, from varying viewpoints, aspects of the care we provide. It has been our experience that the findings of these agencies continue to affirm our ability to deliver a high level of care, as does your data.

This commitment to the health and well-being of our patients, whether Medicare recipients or not, will continue to be the highest priority for all of us at Holy Name Hospital.

Sincerely,

Sister Patricia

Sr. Patricia Lynch
President

SPL:tc

EXPRESS MAIL - 3/19/92

printed on recycled paper

Hunterdon
Medical Center

March 18, 1992

Health Care Financing Administration
Health Standards and Quality Bureau
Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

RE: Medicare Provider Number 310005

Dear Mrs. Kappert,

Hunterdon Medical Center has always been committed to providing the highest quality healthcare to all of its patients. We do not believe, however, that the publication of mortality statistics is the appropriate means to assess or demonstrate the quality of care we provide.

Although the data compiled by the Health Care Financing Administration shows Hunterdon Medical Center to be within acceptable ranges, there is again a question of consistency in the data. Each year, the criteria and mode of calculation is altered, giving inconsistent results in the predicted and observed mortality rates. Comparisons of previous activity are hindered by the continual adjustment of data.

We additionally object to the use of the 30 day criterion for the calculation of mortality rates, since deaths occurring outside our institution may be unrelated to the original cause for hospitalization and, therefore, unrelated to care rendered in this institution. The ongoing inclusion of deaths occurring within 90 and 180 days following selected admissions further distorts the analysis.

In closing, Hunterdon Medical Center believes that the publication of mortality statistics performs a disservice to health care institutions and patients served as it does not result in the improvement of healthcare or the assurance of quality.

Sincerely,

R Wise

Robert P. Wise, President

Flemington, New Jersey 08822-9237 Telephone 201-788-6100

Jersey Shore Medical Center
1945 Route 33, Neptune, New Jersey 07754 (201) 775-5500

Medicare Provider #31-0073

March 16, 1992

Gail R. Wilensky, PhD., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

Dear Dr. Wilensky:

Jersey Shore Medical Center (JSMC) is a voluntary, nonprofit Regional Medical Center serving Monmouth and Ocean counties in New Jersey.

With a capacity of 501 beds, the Medical Center provides a full range of services for the diagnosis, rehabilitation, treatment, and prevention of health problems.

Jersey Shore Medical Center's regionalized services include a Level III Perinatal Center, a Neonatal Intensive Care Nursery, Cardiac Diagnostic Center, Renal Dialysis Center, Community Mental Health Center, and the Center for Cancer Therapy. Over the past two years, a cardiac surgery program has been added as well as a Level II Trauma designation.

As a teaching hospital affiliated with the University of Medicine and Dentistry of New Jersey-Robert Wood Johnson Medical School, Jersey Shore Medical Center has thirty-seven medical specialties represented by its 400 plus physicians and dentists. Because we are a teaching hospital, we attract sicker patients than do other hospitals. In fact, a significant proportion of patients require more intensive care. A large proportion of our patients are also elderly (average age of 75.1 at admission). In fact, close to 30% of our discharges in 1990 were Medicare patients and close to 8% were transferred in from the nursing home community. These patients tend to be significantly sicker because of their age and or disability. Because we are a teaching hospital, and because of our location, we tend to attract patients who wait longer to seek out care and are subsequently sicker upon their arrival. In addition, some of our HIV positive patients receive Medicare benefits. These patients have a tendency to develop pneumonia which can influence our mortality rate. These factors contribute to Jersey Shore Medical Center's patient mix. We understand that HCFA has

attempted to adjust for these factors in reporting our mortality rates. However, given the diversity of our patient population, any attempt to completely adjust for these factors is extremely difficult. The fact that we have older, sicker patients, and that we are a teaching hospital all contribute to the mortality rate in our hospital.

We are confident that we have the appropriate mechanisms in place to review the quality of care received at our institution. We also support the government's effort to use a computer program to look at hospitals which may have mortality rates above the norm. We will use HCFA's Computer data as well as our own data to continue to review the quality of health care provided at JSMC.

As with any computer model, we fully realize that there are limitations. One serious limitation which we would like to bring to your attention is that according to our records, there is a difference of 402 deaths. Subsequently, it would appear that these patients in fact died after discharge. Their deaths could be due to factors unrelated to their hospitalization. These cases need to be investigated further. Medicare is tracking up to 180 days after discharge-we only track if patients die at JSMC.

We realize that mortality rates are only <u>one</u> indicator of the quality of care provided by a medical facility. However, as HCFA has pointed out, this should not be the <u>only</u> factor used to judge the quality of care provided. Other factors need to be monitored as well, and we feel we are currently doing this through our comprehensive quality assessment and improvement program.

Jersey Shore Medical Center has a long history of committment to quality of care. A Board endorsed Quality Assessment and Improvement Program is in place and functions on both a departmental and institutional level. The hospital has continued its accreditation from the Joint Commission for Accreditation of Healthcare Organizations, and the Medical Staff Executive Committee and the Board receive reports from the Quality Assessment and Improvement Committee regularly. The physicians, nurses, and administrative personnel who work with these committees are committed to the provision of Quality of Care and will continue to strive for process improvement.

Sincerely,

Michael J. Schwartz
Chief Operating Officer

rr

KIMBALL
MEDICAL CENTER
600 River Avenue • Lakewood, N.J. 08701-5281 (908) 363-1900

March 10, 1992 Medicare Provider Number: 310084

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

ATTN: Robert Moore

Dear Dr. Wilensky:

The Kimball Medical Center appreciates the opportunity to review the Medicare Hospital Mortality Rates for fiscal year 1990. We wish to congratulate the Health Care Financing Administration on the improvement in methodology used to determine the predicted mortality rates for each hospital.

The observed mortality rates for the category designated as All Causes, at Kimball Medical Center, when compared to the predicted mortality rates falls within one standard deviation for all three of the time periods presented, that is, thirty days following admission, ninety days following admission and one hundred and eighty days following admission. Throughout the years, the professional staffs of this medical center have been engaged in extensive and sophisticated reviews of the quality of care given and corrective actions have been taken whenever they have been indicated.

The values used to predict mortality rates indicate that 19.4% of patients in this sample were transferred from a skilled nursing facility. Also, 69.3% of these patients were admitted for emergencies. We have presented to the Health Care Financing Administration, in previous years, information to support the fact that patients being hospitalized from nursing homes are often more severely incapacitated and much sicker than patients of the same age who are admitted from the many retirement communities that we serve or from the conventional communities that we serve.

We are very pleased that the graphic presentation of the medicare patient admissions for all causes for the fiscal year 1990 clearly shows that, in the three time periods, our

observed mortality rate overlaps the predicted rate and is well within the predicted range.

We thank you for making this information available to us and we wish to assure you that we will continue to do our utmost to bring high quality care to our patients in the most efficient manner possible.

Very truly yours,

Joseph Sherber
President

JS/hc

MORRISTOWN MEMORIAL HOSPITAL
100 MADISON AVENUE / MORRISTOWN, NEW JERSEY 07962-1956
A Major Teaching Affiliate of The Columbia University College of Physicians and Surgeons

Telephone: (201) 540-5177

March 17, 1992

COMMENTS ON HCFA MORTALITY DATA

I. When no standard deviation could be calculated by the government because of small case numbers, a reliable and interpretable estimate of expected mortality could not be determined; this renders the data on actual mortality useless for comparative purposes. We feel that publication of this particular data actually misleads the public, giving them either a false sense of security or an unwarranted cause for concern. The following conditions and procedures fall into this category:

Chronic Obstructive Pulmonary Disease
Transient Cerebral Ischemia
Sepsis
Initial Pacemaker Insertion
Carotid Endarterectomy
Hysterectomy

II. In the remaining five conditions:

(1) At 30 days, MMH's actual mortality rate was lower than expected in four (acute myocardial infarction, congestive failure, pneumonia and stroke), and within the standard deviation in the fifth, (hip fracture).

(2) At 90 days, MMH's rate was lower than expected in all five.

(3) At 180 days, MMH's rate was lower in two (pneumonia and stroke), and within the standard deviation in three (acute infarct, congestive-failure and hip fracture).

III. In the remaining six procedures:

(1) At 30 days, MMH's rate was lower than expected in four (angioplasty, hip replacement, prostatectomy and cholecystectomy) and within the standard deviation in two (coronary artery by-pass and open reduction of fractured hip).

(2) At 90 days, MMH's rate was lower in all six procedures.

(3) At 120 days, MMH's was lower in four (coronary artery by-pass, hip replacement, prostatectomy and cholecystectomy) and within the standard deviation in two (angioplasty and open reduction of fractured hip).

IV. In general, whenever there were enough cases to calculate a standard deviation, Morristown Memorial Hospital was always either lower than the expected rate of mortality or within acceptable range. In addition, for Medicare admissions for all causes, there has been progressive improvement in Morristown Memorial's actual mortality rate (when compared with the predicted rate) since 1988.

Richard P. Oths
President and CEO

RBA:RPO:pmm

1891

The Mountainside Hospital

1991

Celebrating 100 Years of Health Care Servic **Provider #310054**

March 20, 1992

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

Attention: Robert Moore

We are in the process of doing a review of each category where HCFA states that our observed mortality rates are over the predicted range.

Because of the time constraints we have not concluded our review but do have specific comments for the Hysterectomy Category.

Each case noted in the report was reviewed. Each of the patients who had a hysterectomy at The Mountainside Hospital was discharged home. None of these patients expired as a result of their hysterectomy. Two patients had a subsequent admission to The Mountainside Hospital and expired from causes unrelated to their hysterectomy.

We are concerned that the information presented by HCFA is inaccurate and misleading, and not reflective of the high quality care provided at Mountainside Hospital.

Sincerely,

Bernard G. Koval
President/Chief Executive Officer

/dp

Raritan Bay Medical Center

530 New Brunswick Avenue, Perth Amboy, New Jersey 08861 • (908) 442-3700

March 18, 1992

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

Dear Dr. Wilensky:

I am pleased to have the opportunity to submit comments in response to the HCFA mortality data.

Listed below are relevant comments, questions and concerns which should be published at the same time that the data is released:

1. The data to be published is from FY 1990. In FY 1992, this data is no longer timely. The health care environment has rapidly changed over the last two years and therefore this data is difficult to evaluate for current relevance and usefulness. The presentation of dated information is also misleading to the public.

2. Concerns are raised about the distribution and presentation of the data. Will the calculation of data be explained to the public in lay terminology geared towards individuals, who in general, are not statistically or clinically sophisticated? Will the data be distributed to state hospital associations or to local newspapers directly? What type of information sessions will be held for the public to explain the data? Data regarding case mix, co-morbidities, age distribution and source of admission should be presented with each individual hospital's length of stay and mortality figures. In addition, similiar factors and data should be presented for all hospitals so that reasonable comparisons could be made.

3. The mortality rates presented for 30, 90 and 180 days after admission is misleading. It fails to identify those patients who actually expired during their hospital admission. This is a very important point since upon discharge, the Medical Center truly has no control over the patient's course. There are unpredictable and unrelated factors which may impact upon a patient's death, such as patient compliance and implementation of DNR orders. The data does not allow health care providers, or the public, to determine if the cause of death was a result of what the patient was actually treated for in the hospital. Unfortunately, the public's perception may be based on this data which may not be related to the hospital's performance.

4. For all causes, the Standardized Mortality Rate (SMR) at 30, 90 and 180 days for Raritan Bay Medical Center is virtually equivalent to 1, which means that the observed and predicted rates are consistent. Data presented for specific diagnostic categories which exceed a SMR of 1 represent only a small percentage of all mortalities. In addition, the number of cases recorded in each category is small and therefore raises concerns about its validity and significance.

Thank you for the opportunity to share these comments.

Sincerely,

John R. Middleton, M.D. F.A.C.P.
Medical Director and Chairman/ Department of Medicine

JRM/dj

Riverview MEDICAL CENTER
ONE RIVERVIEW PLAZA RED BANK, NJ 07701 (908) 741-2700

ID #310034

March 9, 1992

Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, MD 21207-5187

Att: Robert Moore

Dear Mr. Moore:

The mortality evaluation which we recently received shows no deviation from what was expected. When reviewing this data, we compared it with 1989 and found only minimal changes have occurred due to coding methodology.

Riverview Medical Center welcomes any tool to measure quality. Mortality figures are only one of many methods used to improve care.

Sincerely,

James B Berg

James B. Berg
Executive Vice President,
Chief Operating Officer

JBB:adp

ROBERT·WOOD·JOHNSON
UNIVERSITY HOSPITAL

One Robert Wood Johnson Place
New Brunswick, New Jersey 08901 / 201-828-3000

Office of the President

March 18, 1992

Gail R. Wilensky, Ph.D.
Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, MD 21207-5187

MEDICARE #: 310038

Dear Dr. Wilensky:

Although we are pleased that this Hospital has demonstrated that its overall Medicare mortality in 1990 is "below" the predicted value (if properly viewed on a statistical range basis we are "within" the predicted range), we are troubled by the manner in which this data is being presented.

Use of a specific predicted mortality number rather than a predicted acceptable range assumes that the reader will have understanding and facility with the concept and use of standard deviation, and we believe this assumption to be misguided.

An equally egregious problem is presented by the publication of specific procedure and condition statistics for a hospital even if the case frequency for that procedure/condition precludes the determination of the standard deviation. We believe this breaches scientific standards of data validity.

Although determination of survival risk has apparently taken into consideration certain co-morbidities, review of procedure-related cases suggests that procedure-related predicted mortality has not been determined with due regard for the coincidence of high risk conditions. Although our angioplasty mortality falls within a two standard deviation range of predicted mortality, it appears, as an example, not to have been adjusted for the high frequency of acute myocardial infarction in the angioplasty population.

Sincerely,

Harvey A. Holzberg
President

HAH/kr

A Friend For Life
ST CLARES RIVERSIDE MEDICAL CENTER

Denville Division

Telephone:

Medicare Provider #310050

COMMENTS CONCERNING 1990 MORTALITY RATES FOR MEDICARE PATIENTS

This is the sixth annual publication by the Health Care Financing Administration (HCFA) of hospital mortality rates in an attempt to improve the quality of care provided to Medicare beneficiaries.

The observed mortality rate at St. Clares-Riverside Medical Center for all causes is not significantly different from the predicted rate as computed by the HCFA Mortality Model at 30, 90 and 180 days for FY 1990. These findings are similar to results obtained for the prior two years and suggests that our mortality rate has been consistently acceptable. We are, however, cognizant of the limitations inherent in the mortality model utilized by the HCFA. Factors such as severity of illness, origin of admission and patient population characteristics may not be adequately incorporated by the regression model. Current research in this field will identify additional parameters to be utilized in the development of a more precise model in an attempt to quantify the effectiveness of care for a given hospital.

It should be noted that only a comprehensive quality improvement program will identify ways for a hospital to improve patient care. For example, at St. Clares-Riverside Medical Center, the Medical Staff, Administration, and the Board of Trustees advocate confidential peer review as a means of monitoring the quality of patient care. Our program consists of a Quality Assessment (Q.A.) department and Q.A. committees which report to the chairpersons of the clinical departments, the Medical Executive Committee and a standing committee of the Board of Trustees. The charts for all patients treated at the Medical Center are screened for the quality and appropriateness of care with special emphasis on those of patients who die or develop complications. For patients who die in the Medical Center, one or more uninvolved physicians thoroughly reviews the related medical record. After any necessary clarifying information has been received from the treating physician(s), a report is sent to the Q.A. committee where the quality of care is further analyzed and appropriate actions taken. Opportunities to improve care in the future are sought and implemented when found. Our quality improvement program also includes independent reviews by the Peer Review Organization of New Jersey (PRO-NJ). A regular review of the quality of hospital care is performed by PRO-NJ and any potential problems that are detected are communicated to the hospital such that corrective actions can be taken.

In summary, the data supplied by the HCFA Mortality Model provides useful information to be utilized as a single component in a well developed peer review and related quality improvement program that continually strives to improve the quality of hospital care provided.

Building on Our Tradition of Excellence
St. Joseph's Hospital & Medical Center

St. Joseph's Hospital and Medical Center

703 Main Street ■ Paterson ■ New Jersey 07503 ■ (201) 977-2100

Office of the President

MEDICARE HOSPITAL INFORMATION- 1992

HOSPITAL ID: 310019

The mortality data released by Health Care Financing Administration (HCFA) has as its primary goal..."to improve the effectiveness of medical practice and the quality of care provided to Medicare beneficiaries". The clear implication is that these statistics can be used to measure or otherwise rank the quality of care provided by hospitals and physicians.

Although HCFA claims..."Each year, we have improved the methodology used in the mortality analysis", their data is seriously flawed. In essence, it is a macroanalysis of information which has its origin in fiscal data obtained on Medicare patients. As such, it can never substitute for or be interpreted as an in depth Quality of Care analysis. Unfortunately, HCFA does little if anything to discourage the use of these mortality data for that purpose.

In its distribution for comment, there is insufficient time allowed for hospitals to do meaningful review of hundreds, if not thousands, of cases which comprise the data set. There are no serious analysts of quality health care in the hospital environment who believe that data sets used by HHS can substitute for physician chart review. The system used which purports to correct for co-morbid factors is clearly inadequate to the task. Unfortunately, this creates two problems for hospitals and physicians. The first is inadequate time to analyze all of the discharged cases and, secondly, if such a review could be done, there is inadequate opportunity in both time and space available to refute the data.

There is also the element of, once accused, having the appearance of explanations as being defensive or self-serving. There are clearer examples in the data set for St. Joseph's Hospital, for instance. One indicates a higher than expected mortality range in the early admission and treatment of hip fracture. There is, of course, no way for the data gatherers and publishers to have been able to uncover the fact that many of the hip fractures transported to this hospital from other institutions, for instance nursing homes, are part of the last series of incidents in the lives of some very aged and very debilitated people. In spite of the best interventions that

physicians and nurses can give, many of these patients will pass because of the other diagnoses which contributed to the fracture itself. The cause of death is not the hip fracture nor the therapy given for the fracture. The system will not adjust for the fact that major medical centers with advanced orthopedic training programs, such as this one, are the places to which primary care doctors, who attend patients in nursing homes, repeatedly send these patients. A second example is in the area of the management of acute myocardial infarction in which the expected mortality experience at St. Joseph's Hospital and Medical Center is much less than predicted. To the critical observer, there are many possibilities which could account for such an apparent statistical conclusion. Among these are an inability to assess severity on admission or a population skewed in the direction of youth and health not reflected in the data, as well as marginally satisfactory numbers.

The point is, that in spite of the protestations of the government with regards to their instruction that such data should be used only as a basis for further quality review, its publication in any form, results in serious, significant misinterpretation that does not serve the health care system in the United States well.

Sister Jane Frances Brady
President
St. Joseph's Hospital and Medical Center

SJF/dav

254 Easton Avenue, P.O. Box 591, New Brunswick, New Jersey 08903-0591 • (908) 745-8600

St. Peter's Medical Center

Medicare Provider Number: 310070

March 17, 1992

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

Attention: Robert Moore

Dear Dr. Wilensky:

St. Peter's Medical Center is a 416 bed major medical center and teaching facility offering comprehensive care to the community through a variety of medical and wellness programs.

We are a Catholic, voluntary, non-profit health care facility sponsored by the Diocese of Metuchen. We have been serving the New Brunswick and Central New Jersey area for more than three-quarters of a century.

A major teaching affiliate of the University of Medicine and Dentistry of New Jersey (UMDNJ), St. Peter's provides residency programs in pathology, radiology, pediatrics, obstetrics and gynecology, orthopedic surgery, primary care internal medicine and family practice. There are also fellowships in cardiology, endocrinology, nephrology, infectious disease, pulmonology, hematology/oncology, neonatology and geriatrics.

Our ultimate mission is to meet the medical and health needs of today and tomorrow, and to fulfill the emotional and spiritual needs of our patients and their families. We strive to promote respect and dignity for human life.

The Medical Center welcomes the opportunity to comment on the fifth annual release of Medicare Hospital Mortality Information. St. Peter's has long established an ongoing quality assessment program to objectively and systematically monitor and evaluate the quality and appropriateness of patient care, and pursue opportunities to improve patient care. Quality of care is of utmost concern to the Board of Trustees, Administration, Medical Staff and Management Staff of St. Peter's Medical Center.

Again this year, the HCFA mortality report indicates that all observed mortality rates fell with the predicted ranges (where established).

Of the 591 deaths from "All Causes", 185 fell into the eight HCFA categories of deaths and occurred within 180 days of admission. This represents 31.3% of the deaths (185/591 "All Causes") for fiscal year 1990.

There were 108 (58.4%) patients who had died in the hospital during the identified admissions. Seventy-seven patients in the eight HCFA categories had been discharged alive following the identified admission. All charts were retrieved and reviewed indepth. Of the 77 cases, 41 were discharged to long-term nursing facilities and 36 went home.

Of those discharged, forty-one were readmitted (some multiple times) and subsequently died in the hospital. Thirty-three patients were readmitted from home.

Three were discharged home for terminal care and two patients with severe cardiac conditions refused surgery and signed out against medical advice. Thus, a total of 157 of the 185 deaths could be verified.

Since the charts were randomly selected by HCFA for each of the eight categories, one must note that this does not imply that the patient died of that diagnosis. HCFA states, "Thus, if a patient had more than one hospital discharge during the specified fiscal year, any one of these stays may have been selected for analysis." For example, there were 153 discharges listed under the category of Pneumonia/Influenza. Of the 51 deaths in this category, 22 recovered and were discharged and ultimately died of other causes.

One factor not considered in the HCFA data are the "Do Not Resuscitate" (DNR) orders. Nearly 58.9% of the patients in the Mortality Study had DNR orders. An indepth study of these cases was made and revealed all were appropriate considering the patient/family requests, the age of the patients, the severe medical conditions and the poor prognosis.

The HCFA mortality data release continues to present important problems.

(1) We firmly believe that statistics alone cannot be the sole indicator for evaluation of care.

(2) The abbreviated time-frame for response (3 weeks from the date of the HCFA letter) places enormous pressures on the hospital to retrieve, review and evaluate cases and categories. This is very expensive in both time and money.

(3) In these days of cost constraints, it would have been helpful if HCFA provided a computerized listing of the cases in each category. Instead, it is necessary to manually identify cases from 75-plus pages containing 40 entries per page. One more computer step at HCFA would have been most helpful.

(4) The only advantage of the indepth review as currently constituted is that it gives a hospital a parameter against which to measure itself.

Again, this year, there are errors in the information provided for the characteristics of St. Peter's Medical Center. There were 100.5 interns and residents in St. Peter's Medical Center, a major teaching hospital of the UMDNJ-Robert Wood Johnson Medical School. St. Peter's Medical Center has a Cardiac Care Unit as well as a Medical Intensive Care and a Surgical Intensive Care Unit.

St. Peter's Medical Center continuously strives to assure high quality patient care by requiring and supporting such detailed review through its Medical Center-wide quality assessment program.

Very truly yours,

John Matuska

John Matuska
President

West Jersey Health System

Thomas H. Litz
Senior Vice President
For Hospital Affairs

March 19, 1992

MEDICARE PROVIDER #310022

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187
ATTN: Robert Moore

Dear Dr. Wilensky:

We appreciate the opportunity to comment on the information regarding mortality rates of Medicare patients admitted to our four hospitals and request that any information released to the public include the following comments.

Our analysis of the detailed information provided on individual patients indicates that discrepancies exist particularly in the total numbers of patients. Our records show that for fiscal year 1990 we treated 7,809 Medicare patients whereas your report shows a total of 7,012; correspondingly, the number of cases in the individual diagnostic or procedure categories differs. Discrepancies at this level obviously have an impact on the interpretation of the data since they could significantly change the observed mortality rate.

We would also like to note discrepancies in the sections on hospital demographics and characteristics. The total number of beds in our health system is 763 not 579. In addition, we do not provide hospice care, organ transplant, rehabilitation or psychiatric services within our hospitals. Your demographic section indicates 0.0% patients transferred from skilled nursing facility whereas we estimate about 18% of our Medicare patients come from nursing homes.

The West Jersey Health System will continue to incorporate these statistics into our ongoing quality assessment and improvement program. Although our observed mortality rates are all within the 95% confidence range, we will closely review those areas where we have concerns. Only peer review of the actual care provided can indicate whether there is a problem with the process of care.

Sincerely,

Thomas H. Litz, FACHE

SER/ker

ZURBRUGG HOSPITAL

March 16, 1992

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, MD 21207-5187
ATTN: Robert Moore

Dear Dr. Wilensky:

Thank you for giving Zurbrugg Hospital the opportunity to review and comment on the 1990 Medicare Mortality Report your administration released last February 28, 1992. This is always an issue of vital importance not only to Zurbrugg Hospital but to all hospitals and to the public at large.

The number of cases reported by Zurbrugg Hospital on most of the conditions and procedures were fewer than 50 cases, which did not permit satisfactory estimation of the standard deviation.

Because Zurbrugg Hospital believes that our first responsibility is to our patients, we strive to provide the best quality medical care. Through our quality assessment and improvement activities, mortality data, which is an outcome indicator, is reviewed monthly to identify potential areas for evaluation, improvement and problem resolution.

Finally, we hope the release of this data will be helpful, and not confuse or mislead the media and public regarding our hospital and this report.

Sincerely,

Bernadette Mangan

Bernadette Mangan
President, Zurbrugg Hospital

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